

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

New York Life Insurance Company Political Action Committee

ADDRESS (number and street)

51 Madison Avenue

Room 1109

☐ Check if different
than previously
reported. (ACC)

New York

NY

10010

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00158881

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report(Q1)
- ☐ July 15
Quarterly Report(Q2)
- ☐ October 15
Quarterly Report(Q3)
- ☐ January 31
Quarterly Report(YE)
- ☐ July 31 Mid-Year
Report(Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☒ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2008

through

08

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Helen Stagias

Signature of Treasurer

Electronically Filed by Helen Stagias

Date

09

19

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
New York Life Insurance Company Political Action Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		438461.86
(b) Cash on Hand at Beginning of Reporting Period	196143.37	
(c) Total Receipts (from Line 19)	114465.19	794412.16
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	310608.56	1232874.02
7. Total Disbursements (from Line 31)	95263.00	1017528.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	215345.56	215345.56
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New York Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	80437.38	401229.81
(i) Itemized (use Schedule A)		
(ii) Unitemized	33654.35	379789.88
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	114091.73	781019.69
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➤	114091.73	781019.69
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	6000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	373.46	7392.47
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	114465.19	794412.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	114465.19	794412.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	3855.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	3855.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	91500.00	995750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	763.00	1173.46
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	763.00	1173.46
29. Other Disbursements.....	3000.00	16750.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	95263.00	1017528.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95263.00	1017528.46

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	114091.73	781019.69
34. Total Contribution Refunds (from Line 28(d))	763.00	1173.46
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	113328.73	779846.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	3855.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	3855.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 311

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

JP Morgan Chase Bank

Mailing Address 386 Park Avenue

City

New York

State

NY

Zip Code

10016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

7392.47

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: 4593904

Amount of Each Receipt this Period

373.46

Interest Received

SUBTOTAL of Receipts This Page (optional)

373.46

TOTAL This Period (last page this line number only)

373.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Frank L. King

Mailing Address 1629 Fontana Cliffs Court

City

North Las Vegas

State

NV

Zip Code

89084-2028

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 8

Transaction ID: 4601425

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. Steve Billey

Mailing Address 33 Moose Brook Road

City

Auburn

State

ME

Zip Code

04210-7960

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 8

Transaction ID: 4615837

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mr. Morris C. Knutson

Mailing Address 1836 Charles Avenue

City

Turlock

State

CA

Zip Code

95380-4232

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 0 8

Transaction ID: 4705911

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B
Totaling \$750.00 This changes the YTD Total to \$12-5.00

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Pat Nowak

Mailing Address 98 Logwood Street

City

South Burlington

State

VT

Zip Code

05403-6444

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1002754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David A. Ponder

Mailing Address 2705 Falling Timber Trail

City

Edgewater

State

MD

Zip Code

21037-1220

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1003602754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rudy Pope

Mailing Address 4 Summerrules Road

City

Clarks Summit

State

PA

Zip Code

18411-1073

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1003712754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

198.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mel M. Adams

Mailing Address 11333 Warbonnet

City

El Paso

State

TX

Zip Code

79936-2312

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10052754

Amount of Each Receipt this Period

31.00

P/R Deduction (\$31.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John Rocco, Jr.

Mailing Address 220 Broadway
#203

City

Lynnfield

State

MA

Zip Code

01940-2353

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1010372754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Walton W. Rogers

Mailing Address 504 Pinefield Drive

City

Severna Park

State

MD

Zip Code

21146-2320

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1011072754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

197.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Archie L. Maybank

Mailing Address 235 W 139th Street

City

New York

State

NY

Zip Code

10030-2104

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10112754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas H. Herlong, Sr., Sr.

Mailing Address 65 Bouknight Road

City

Johnston

State

SC

Zip Code

29832-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10142754

Amount of Each Receipt this Period

34.67

P/R Deduction (\$34.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael M. Samp

Mailing Address 320 E Plum Creek Road

City

Sioux Falls

State

SD

Zip Code

57105-6955

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.38

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1014542754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

148.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Darlene Schrank

Mailing Address 41603 E Ruppert Road

City

Benton City

State

WA

Zip Code

99320-8720

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1017042754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard Schwartz

Mailing Address 3044 Kennington Way

City

Kokomo

State

IN

Zip Code

46902-5079

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1017502754

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. C. E. Scrivner

Mailing Address 11925 Southeast 231st Street

City

Kent

State

WA

Zip Code

98031-3688

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1018042754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

508.33

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Sidney L. Seligstein

Mailing Address 1568 Massey Point Lane

City

Memphis

State

TN

Zip Code

38120-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	8

Transaction ID: PR1018432754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. John A. Thompson, Jr.

Mailing Address PO Box 46

City

Liberty Hill

State

SC

Zip Code

29074-0046

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	8

Transaction ID: PR10202754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$40.00 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Christopher L. Simons

Mailing Address 713 Carper Drive

City

Artesia

State

NM

Zip Code

88210-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	8

Transaction ID: PR1021632754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

155.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jason C. Stearns

Mailing Address 30-45 33rd Street
1R

City State Zip Code
Astoria NY 11102-1444

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
A.V.P. - Records Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1026462754

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael A. Stefano, III

Mailing Address 18 Quaker Manor Lane

City State Zip Code
Patterson NY 12563-2347

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1026572754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jason L. Hooz

Mailing Address 2868 South Palisades Avenue

City State Zip Code
Santa Cruz CA 95062-5406

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR102754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

194.58

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Gina M. Stoltz

Mailing Address 771 Libby Lane

City

Mandeville

State

LA

Zip Code

70471

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1027562754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bill Terrill

Mailing Address PO Box 935
405 Riverview

City

Craig

State

CO

Zip Code

81626-0935

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1031032754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Demetrios Theodoropoulos

Mailing Address 6 Fleetwood Court

City

Orinda

State

CA

Zip Code

94563-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1031322754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶

141.06

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Alana D. Thomson

Mailing Address 7 Frankel Road

City

Massapequa

State

NY

Zip Code

11758-7258

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1032242754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Serge Tinovsky

Mailing Address 284 Garretson Avenue

City

Staten Island

State

NY

Zip Code

10305-1236

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1032752754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Tom Flournoy, Jr.

Mailing Address 2014 Carlyle Place
5300 Zebulon Road

City

Macon

State

GA

Zip Code

31210-2199

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10362754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

254.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Billy J. Watson

Mailing Address 3435 Indian Lake Trail

City

Pelham

State

AL

Zip Code

35124-2718

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10372754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas Flournoy, III

Mailing Address 100 Colony Square
Suite 816

City

Atlanta

State

GA

Zip Code

30361-6204

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10392754

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Carol Wiley

Mailing Address 69-11A 188th Street

City

Flushing

State

NY

Zip Code

11365-3752

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1042992754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

290.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Billy R. Williams

Mailing Address 601 Montclair Way

City

State

Zip Code

Mobile

AL

36609-6539

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1043302754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jonathan S. Williams

Mailing Address 118 Bower Lane

City

State

Zip Code

Forest Hill

MD

21050-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1043542754

Amount of Each Receipt this Period

32.00

P/R Deduction (\$32.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Witterschein

Mailing Address 50 Kemp Avenue

City

State

Zip Code

Fair Haven

NJ

07704-3504

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1045052754

Amount of Each Receipt this Period

86.55

P/R Deduction (\$28.85 Weekly)

SUBTOTAL of Receipts This Page (optional)

160.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott Woodley

Mailing Address 1036 Primrose Lane

City

Fond Du Lac

State

WI

Zip Code

54935-1869

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1045792754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Wesley R. Young

Mailing Address 2101 Dayflower Trace

City

Cedar Park

State

TX

Zip Code

78613-5701

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1047962754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry L. Spivey

Mailing Address 1307 Fairway Drive

City

Elberton

State

GA

Zip Code

30635-2611

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10482754

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

210.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Van Ewing

Mailing Address 1235 South Prairie Avenue
Unit 2909

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1049492754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steve M. Landau

Mailing Address 45 Derby Avenue

City State Zip Code
Cedarhurst NY 11516-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1049912754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Warren Budd, Jr.

Mailing Address PO Box 1723

City State Zip Code
Newnan GA 30264-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10502754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

165.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas H. Smoot, II

Mailing Address 102 Park Avenue
PO Box 21755

City State Zip Code
St. Simons Island GA 31522-0855

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10522754

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Charlton Rogers, Jr.

Mailing Address 1557 E Hencart Road

City State Zip Code
Glennville GA 30427-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10542754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Victor G. Samoilovich

Mailing Address 328 Glenwood Avenue

City State Zip Code
Leonia NJ 07605-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1058042754

Amount of Each Receipt this Period

35.43

P/R Deduction (\$11.81 Weekly)

SUBTOTAL of Receipts This Page (optional)

492.09

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dean H. Grant

Mailing Address 3669 Sussex Drive

City

Milledgeville

State

GA

Zip Code

31061-9382

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10582754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark Sigmund

Mailing Address 6697 Woodberry Road

City

Columbus

State

GA

Zip Code

31904-2296

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10662754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kermit R. Griner

Mailing Address 305 Crestfield Drive

City

Columbus

State

GA

Zip Code

31904-2325

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10682754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

242.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ted Champaneria

Mailing Address 1612 Magnolia Drive

City

Murfreesboro

State

TN

Zip Code

37128-5907

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10702754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kent E. Moss

Mailing Address 11409 Paldao Road

City

Tampa

State

FL

Zip Code

33618-3923

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10782754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jay A. Ginn, III

Mailing Address 401 Prince Road

City

St. Augustine

State

FL

Zip Code

32086-4906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10822754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

209.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gary T. Baumgarten

Mailing Address 230 W Reading Way

City

Winter Park

State

FL

Zip Code

32789-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10842754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Salwyn M. Parker

Mailing Address 5805 Diamond Point Circle

City

El Paso

State

TX

Zip Code

79912

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
G.O. Agency Standards Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10922754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank B. Dolph, III

Mailing Address 631 Intracoastal Drive

City

Fort Lauderdale

State

FL

Zip Code

33304-3618

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR10982754

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

321.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Curt L. Eskew, Jr.

Mailing Address 1680 Keely Lane

City

Sarasota

State

FL

Zip Code

34232-3061

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11012754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas G. Krach

Mailing Address 20670 Westminster Drive

City

Strongsville

State

OH

Zip Code

44149-6773

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11112754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. William F. Lyon

Mailing Address 3809 Arbor Lane

City

Cincinnati

State

OH

Zip Code

45255-5628

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11142754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

307.73

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark I. Burton

Mailing Address 22781 Foxridge

City

Mission Viejo

State

CA

Zip Code

92692-4703

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

683.38

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11172754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David R. Colflesh

Mailing Address 905 Olive
PO Box 37

City

Tarkio

State

MO

Zip Code

64491-0037

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11182754

Amount of Each Receipt this Period

41.66

P/R Deduction (\$41.66 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Bork

Mailing Address 2426 Gibley Park

City

Toledo

State

OH

Zip Code

43617-2233

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11222754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

191.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Timothy I. Miller

Mailing Address 285 Main Street

City

Dunstable

State

MA

Zip Code

01827-1911

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR112754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kim D. King

Mailing Address 8037 Lea Court

City

Holland

State

OH

Zip Code

43528-8042

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11282754

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. J. P. Lyons

Mailing Address 54 Cranmore Road

City

Wellesley

State

MA

Zip Code

02481-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1132754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

196.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Larry E. Beebe

Mailing Address 3209 Stone Wall Road

City

Maumee

State

OH

Zip Code

43537-9593

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11342754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bill Hensel

Mailing Address PO Box 132

City

Strasburg

State

OH

Zip Code

44680-0132

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11392754

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William H. Werfelman, Jr.

Mailing Address 195 Gallows Hill Road

City

Redding

State

CT

Zip Code

06896-1423

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1142754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

223.34

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeff King

Mailing Address 8037 Lea Court

City

Holland

State

OH

Zip Code

43528-8042

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR11432754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. James R. Vavra

Mailing Address 1553 Southwest Manor Lake Drive

City

Lees Summit

State

MO

Zip Code

64082

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR11542754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Wee-
kly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael C. Quilter

Mailing Address PO Box 443

City

London

State

OH

Zip Code

43140-0443

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR11552754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

157.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tom Staebler

Mailing Address 7303 Red Bank Road

City

Westerville

State

OH

Zip Code

43082-8241

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11652754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael A. Yashnyk

Mailing Address 83 Crestwood Boulevard

City

Farmingdale

State

NY

Zip Code

11735-5802

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11672754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Paul E. Moyer

Mailing Address 3220 Briarcliff Drive

City

Findlay

State

OH

Zip Code

45840-4102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11702754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

349.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Barbara F. Hinebaugh

Mailing Address 3201 Westmont Place

City

the Villages

State

FL

Zip Code

32162-7640

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11752754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Dave Baker

Mailing Address 31686 Lake Road

City

Bay Village

State

OH

Zip Code

44140-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11762754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steven D. Meier

Mailing Address 4575 Lanercost Way

City

Columbus

State

OH

Zip Code

43220-2916

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11802754

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

218.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Andrew N. Reiss

Mailing Address 1288 Bridle Estates Drive

City

Yardley

State

PA

Zip Code

19067-3961

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

290.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1182754

Amount of Each Receipt this Period

48.45

P/R Deduction (\$16.15 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph B. Sculler

Mailing Address 17117 Stare Street

City

Northridge

State

CA

Zip Code

91325-1648

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11852754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Fred Eisner

Mailing Address 432 E Glengary Circle

City

Highland Heights

State

OH

Zip Code

44143-3623

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11882754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

124.45

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Janet B. Spector

Mailing Address 802 Lakeglen Drive

City

Suwanee

State

GA

Zip Code

30024-3464

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11892754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Peter W. Scheid

Mailing Address 3175 Scarborough Road

City

Cleveland Heights

State

OH

Zip Code

44118-4049

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11912754

Amount of Each Receipt this Period

98.00

P/R Deduction (\$98.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Delores McGhee

Mailing Address 358 Hackensack Street
Apt. B

City

Wood-Ridge

State

NJ

Zip Code

07075-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR11962754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

184.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark Vahala

Mailing Address 500 Cedar Elm Court

City
Irving

State
TX

Zip Code
75063-8467

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12062754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Z. J. Sethna

Mailing Address 5607 Peninsula Park

City
Houston

State
TX

Zip Code
77041-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12122754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kishan Patel

Mailing Address 2761 Manu Court

City
Glenview

State
IL

Zip Code
60026-1077

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12192754

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

408.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Edwin R. Bochtler

Mailing Address 11077 Saffold Way

City

Reston

State

VA

Zip Code

20190-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.44

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12212754

Amount of Each Receipt this Period

63.00

P/R Deduction (\$21.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. James Kageleiry

Mailing Address 8 Hayes Lane

City

Dover

State

NH

Zip Code

03820-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR122754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. David E. Levee

Mailing Address 982 Vernon Avenue

City

Glencoe

State

IL

Zip Code

60022-1266

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12292754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

213.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 311

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Sam Alame

Mailing Address 2609 W Wilson

City

Batavia

State

IL

Zip Code

60510-7690

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12332754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Julius G. Alberico

Mailing Address 302 Silver Creek Lane

City

Norwalk

State

CT

Zip Code

06850-1646

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12432754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Curtis T. Schultz

Mailing Address 2204 Cherokee

City

Valparaiso

State

IN

Zip Code

46383-2284

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12522754

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

510.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph H. Lee, Sr., Sr.

Mailing Address 16640 Kehrs Grove

City

Chesterfield

State

MO

Zip Code

63005-4539

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12542754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Harlow C. Johnson

Mailing Address 1070 Lakeview Way

City

Emerald Hills

State

CA

Zip Code

94062-3446

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12552754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Raman K. Patel

Mailing Address 3281 Pleasant Run

City

Northbrook

State

IL

Zip Code

60062-7411

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12592754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

171.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Greg True

Mailing Address 719 Council Hill

City

East Dundee

State

IL

Zip Code

60118-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12632754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Larry D. Massey

Mailing Address 3761 Mountain Way Cove

City

Snellville

State

GA

Zip Code

30039-8413

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12662754

Amount of Each Receipt this Period

42.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Tom Gavin

Mailing Address 449 Vista Court

City

Benicia

State

CA

Zip Code

94510-2715

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12682754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

168.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Bev Spellbring

Mailing Address 3009 McColm Drive

City

Farmington

State

NM

Zip Code

87402-5259

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12712754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory C. Lavalley

Mailing Address 1377 Shadow Creek Drive

City

Fairview

State

TX

Zip Code

75069-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Zone Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12772754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Amrit Mittal

Mailing Address 215 Rugeley Rdd

City

Western Springs

State

IL

Zip Code

60558-1954

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12792754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

266.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Breton W. Williams

Mailing Address 2600 Stockwell Lane W

City

Clinton

State

IA

Zip Code

52732-9604

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR12852754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steven J. Heussner

Mailing Address 201 Falling Water Drive

City

McKinney

State

TX

Zip Code

75070-8776

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13072754

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. David Duchene

Mailing Address 25 Kingsview Lane N

City

Plymouth

State

MN

Zip Code

55447-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13152754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Cynthia Green

Mailing Address 1108 Southridge Road

City

Lansing

State

MI

Zip Code

48917-9511

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13212754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert V. Schechter

Mailing Address 1448 Lakewood Drive

City

Bloomfld Hills

State

MI

Zip Code

48302-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13232754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. G. J. Pasman, Jr.

Mailing Address 7397 Heather Ridge Southeast

City

Caledonia

State

MI

Zip Code

49316-9010

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13302754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

223.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey W. Slattery

Mailing Address 4052 Walton Ridge Court

City

Mason

State

OH

Zip Code

45040-5916

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13312754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brian T. Nowak

Mailing Address 6111 E Cobblestones Lane

City

Sylvania

State

OH

Zip Code

43560-9452

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13342754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Varda N. Fink

Mailing Address 13325 Old Forge Road

City

Silver Spring

State

MD

Zip Code

20904-6328

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13352754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

365.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Jungen

Mailing Address N81 W23285 Five Iron Way

City

Sussex

State

WI

Zip Code

53089-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13462754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jim Doke

Mailing Address 420 E Trails End Avenue

City

Bruce

State

WI

Zip Code

54819-9793

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13472754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gary E. Wendlandt

Mailing Address 45 Gramercy Park North
Apt. 2B

City

New York

State

NY

Zip Code

10010-6308

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice Chairman & Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.08

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13492754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

139.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gerry Stadler

Mailing Address E10011 Fawn Lane

City

Reedsburg

State

WI

Zip Code

53959-9632

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13512754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Frank M. Covelli

Mailing Address 9134 Settlers Road

City

Madison

State

WI

Zip Code

53717-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13522754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Genera

Mailing Address 66 River Street

City

Guilford

State

CT

Zip Code

06437-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1352754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

133.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ken Olson

Mailing Address N6591 Potter Road
PO Box 100

City State Zip Code
Black River Falls WI 54615-0100

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13562754

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. George N. Ridings

Mailing Address 887 West Main Street
PO Box 1750

City State Zip Code
Richmond KY 40476-1750

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13622754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John F. O'Brien

Mailing Address 131 Trumbull Lane

City State Zip Code
South Windsor CT 06074-2370

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
A.V.P. - Regional Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1362754

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Weekly)

SUBTOTAL of Receipts This Page (optional)

376.29

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. George Nichols, III

Mailing Address 10010 Gary Road

City

Potomac

State

MD

Zip Code

20854-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13722754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jim Naive

Mailing Address 6256 Bell Road Court

City

Montgomery

State

AL

Zip Code

36117-4357

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR13902754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Norman M. Bryant

Mailing Address 14911 Forest Oaks Drive

City

Louisville

State

KY

Zip Code

40245-6509

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14022754

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

362.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Burt

Mailing Address 3018 Colonial Hill Road

City

Louisville

State

KY

Zip Code

40205-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14032754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bill Kimbrough

Mailing Address 5096 Cypress Lake Drive

City

Lake Park

State

GA

Zip Code

31636-3140

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14092754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jon Sellers

Mailing Address 109 O' Neal Court

City

Andalusia

State

AL

Zip Code

36420-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14112754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

102.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Steven R. Kanaski

Mailing Address 9692 Sterling Point Court

City

Loomis

State

CA

Zip Code

95650-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14122754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. James E. Mason

Mailing Address 3241 Circle Drive

City

Hopkinsville

State

KY

Zip Code

42240-4807

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14142754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Lloyd R. Wilson

Mailing Address 3148 Pine Ridge Road

City

Birmingham

State

AL

Zip Code

35213-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14162754

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional)

609.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ross-Morris Sims

Mailing Address 91 Valley View Road

City

Cortlandt Manor

State

NY

Zip Code

10567-1235

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14212754

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. R. Frank Avrett

Mailing Address 4343 N Scottsdale Road
Suite 220

City

Scottsdale

State

AZ

Zip Code

85251-3344

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14232754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Tim Ellen

Mailing Address 113 Highland Point Drive

City

La Grange

State

GA

Zip Code

30240-3791

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14282754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

404.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joe W. Donaldson

Mailing Address 106 Glynlakes Drive

City

Pike Road

State

AL

Zip Code

36064-1766

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14372754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Patrick L. McCraw

Mailing Address 122 McDill Cove

City

Madison

State

MS

Zip Code

39110-6562

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14412754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Pat Ingram

Mailing Address PO Box 900

City

Cleveland

State

MS

Zip Code

38732-0900

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14492754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

349.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John H. Allen

Mailing Address 5804 Randolph Road

City

North Little Rock

State

AR

Zip Code

72116-6329

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14502754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jerry Coats

Mailing Address 165 Pebble Beach Drive

City

Little Rock

State

AR

Zip Code

72212-2645

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14562754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Timothy A. Martin

Mailing Address 106 Lake Shore Drive

City

Russellville

State

AR

Zip Code

72802-7910

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14612754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

238.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Ellwanger, Jr.

Mailing Address 430 Dunham Road

City

Fairfield

State

CT

Zip Code

06824-2009

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Cvp - Market Management

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1462754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas L. McConathy

Mailing Address 11813 Towering Oaks Drive

City

Baton Rouge

State

LA

Zip Code

70810-3162

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14692754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Dan Faulk

Mailing Address 12463 Coursey Boulevard

City

Baton Rouge

State

LA

Zip Code

70816-4550

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14702754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

186.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Kathleen T. Davenport

Mailing Address 1337 Huron Avenue

City

Metairie

State

LA

Zip Code

70005-1233

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14762754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. John Wemple

Mailing Address 7774 Copperfield Court

City

Baton Rouge

State

LA

Zip Code

70808-6770

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14932754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Tim C. Fitzgerald

Mailing Address 12086 Ellerbe Road

City

Shreveport

State

LA

Zip Code

71115-9568

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR14942754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

175.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael McCann

Mailing Address 17510 Galmiche Court

City

Chesterfield

State

MO

Zip Code

63005-4343

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15022754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Dom V. Cianciotti

Mailing Address 3 Malcoms Landing

City

Northport

State

NY

Zip Code

11768-1559

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

670.72

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1502754

Amount of Each Receipt this Period

83.84

P/R Deduction (\$83.84 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Dan Madden

Mailing Address 3990 College Street

City

Arcadia

State

LA

Zip Code

71001-3641

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15042754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

154.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John B. Stagg

Mailing Address 8816 S Lakewood Court

City

Tulsa

State

OK

Zip Code

74137-3124

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15072754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bryan S. Norris

Mailing Address 639 Loyola Avenue
Suite 1900

City

New Orleans

State

LA

Zip Code

70113-3188

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15102754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Beaver Smith

Mailing Address 3922 Patterson Road

City

New Orleans

State

LA

Zip Code

70114-1809

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15152754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

503.25

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Sidney A. Triche

Mailing Address Post Office Box 159

City

Larose

State

LA

Zip Code

70373-0159

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR15162754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Larry S. Richardson

Mailing Address 8044 Highway 941

City

Gonzales

State

LA

Zip Code

70737-8301

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR15212754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Daryl R. Ellis

Mailing Address 521 Louray Court

City

Baton Rouge

State

LA

Zip Code

70809-6777

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR15282754

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

171.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph S. Bonin

Mailing Address 633 Gertrude Drive

City

St. Martinville

State

LA

Zip Code

70582-4935

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15302754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher J. Prudhomme

Mailing Address 165 Emmons Canyon Lane

City

Alamo

State

CA

Zip Code

94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15382754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Samuel L. Hebert

Mailing Address 3307 Henderson Bayou Road

City

Lake Charles

State

LA

Zip Code

70605-2248

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15402754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

364.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gordon D. Ellis, Jr.

Mailing Address 2296 Eliza Beaumont Lane

City

Baton Rouge

State

LA

Zip Code

70808-2269

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15462754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael T. Delahaye

Mailing Address 6415 Sevenoaks

City

Baton Rouge

State

LA

Zip Code

70806-7335

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

766.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15472754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William P. Chiu

Mailing Address 10 Harmony Lane
PO Box 154

City

East Setauket

State

NY

Zip Code

11733-0154

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1552754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

167.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Eric B. Campbell

Mailing Address 240 E 47th Street
Apt. 22C

City State Zip Code
New York NY 10017-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
E.V.P. - Chief Distribution Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15632754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Rose Denmark

Mailing Address 81 Knapp Road

City State Zip Code
Port Allegany PA 16743-6033

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15672754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Noland

Mailing Address 5933 S Knoxville

City State Zip Code
Tulsa OK 74135-7806

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15692754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

423.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Fred Bangasser

Mailing Address 2108 Key W Cove

City

Austin

State

TX

Zip Code

78746-7256

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15792754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Larry Bernard

Mailing Address 10930 Beinhorn

City

Houston

State

TX

Zip Code

77024-4518

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15802754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Raymond Vitek, Jr.

Mailing Address 818 San Marino

City

Sugar Land

State

TX

Zip Code

77478-3328

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15822754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

276.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Nowak

Mailing Address 98 Logwood Street

City

South Burlington

State

VT

Zip Code

05403-6444

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1582754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Ray

Mailing Address 6230 Stefani Drive

City

Dallas

State

TX

Zip Code

75225-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior V.P. - West Central Agencies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15882754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Erben

Mailing Address 302 Jack Nicklaus

City

Austin

State

TX

Zip Code

78738-1714

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR15912754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

437.46

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Leon A. Mahfouz

Mailing Address 15 Whisper Wind Place

City

the Woodlands

State

TX

Zip Code

77382-1038

FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR15932754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael G. Morgan

Mailing Address 2791 Nightwind Court

City

Frisco

State

TX

Zip Code

75034-4669

FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Zone Finance & Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR15972754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mike Jones

Mailing Address 11232 Northview Drive

City

Fort Worth

State

TX

Zip Code

76008-5219

FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR15992754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

128.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gib Surles

Mailing Address 434 Westminster

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16012754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Frank J. Ollari

Mailing Address 4430 Douglaston Parkway
Apt. 6F

City

Douglaston

State

NY

Zip Code

11363-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1602754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Tom Ball, III

Mailing Address 2200 Westlake Drive

City

Austin

State

TX

Zip Code

78746-2933

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16082754

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

187.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Vick

Mailing Address 1645 Harper Road

City

Kerrville

State

TX

Zip Code

78028-2994

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16092754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Lawson J. Schuford, Jr.

Mailing Address 201 Plano Street

City

Shreveport

State

LA

Zip Code

71103-2056

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16102754

Amount of Each Receipt this Period

41.70

P/R Deduction (\$41.70 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John C. Ayers

Mailing Address 4655 Wisteria

City

Dallas

State

TX

Zip Code

75116-8027

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16112754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

93.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Frank Knox

Mailing Address 1904 Morning Star

City

Edmond

State

OK

Zip Code

73034-6541

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16202754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stewart H. Walker

Mailing Address 6A Evergreen Lane

City

Chappaqua

State

NY

Zip Code

10514-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR162754

Amount of Each Receipt this Period

36.00

P/R Deduction (\$12.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Breedlove

Mailing Address 1227 Fisher

City

Tyler

State

TX

Zip Code

75701-6929

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16292754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

186.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert McKinley

Mailing Address 1277 Treat Boulevard Suite 600

City

Walnut Creek

State

CA

Zip Code

94597-7929

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President - Pacific Agenci

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16302754

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. A. Saenz

Mailing Address 2002 S Westgate Drive

City

Weslaco

State

TX

Zip Code

78596-9310

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16402754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Trenton D. Lewis

Mailing Address 1140 Covewood Trail

City

Maitland

State

FL

Zip Code

32751

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16422754

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Weekly)

SUBTOTAL of Receipts This Page (optional)

262.19

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Yuka Nakahara-Goven

Mailing Address 1209 Magnolia Drive

City

Carrollton

State

TX

Zip Code

75007-4852

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16482754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Sonny Espinoza, III

Mailing Address 608 Golondrina

City

Roswell

State

NM

Zip Code

88201-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16502754

Amount of Each Receipt this Period

32.00

P/R Deduction (\$32.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. JOE EVAN STILL

Mailing Address 3717 Raguet Street

City

Nacogdoches

State

TX

Zip Code

75965-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16582754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

108.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Karen Watson

Mailing Address 3301 Riverway Court

City

Fort Worth

State

TX

Zip Code

76116-9561

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16592754

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Elizabeth S. Gonzales

Mailing Address 10309 Yellowstone Drive

City

Austin

State

TX

Zip Code

78747-3947

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16672754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Burson

Mailing Address 22 Canterbury Lane

City

Sandy Hook

State

CT

Zip Code

06482-1583

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp - Chief Agency Officer - Asia Regi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16682754

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kevin R. Garman

Mailing Address 5012 Avenue Avignon

City

Lutz

State

FL

Zip Code

33558-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16732754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. David M. Humbert

Mailing Address 6802 Canon Wren Drive

City

Austin

State

TX

Zip Code

78746-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16742754

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Stuart Isgur

Mailing Address 2025 Huntington Lane

City

Fort Worth

State

TX

Zip Code

76110-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16782754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.33 Monthly)

SUBTOTAL of Receipts This Page (optional)

434.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. JOHN R STILL

Mailing Address 3803 Buckingham

City

Nacogdoches

State

TX

Zip Code

75965-5874

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16792754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Marcel R. Frey

Mailing Address 1703 S Medio River Circle

City

Sugar Land

State

TX

Zip Code

77479-5315

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16822754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rodger K. Johnson

Mailing Address 910 N Houston

City

Bullard

State

TX

Zip Code

75757

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16882754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

291.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas W. Robinson, Jr.

Mailing Address 12131 Broken Bough

City

Houston

State

TX

Zip Code

77024-4253

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR16902754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steve Maus

Mailing Address 4821 Augusta Drive

City

Frisco

State

TX

Zip Code

75034-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17022754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard H. Eppink, Jr.

Mailing Address 5079 Jasmine Way

City

Palm Harbor

State

FL

Zip Code

34685-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1702754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. A. C. Tracy Wood, III

Mailing Address PO Box 12425

City

Dallas

State

TX

Zip Code

75225-0425

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17032754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Marcus J. Ham

Mailing Address 8713 Maple Hollow Court

City

Granite Bay

State

CA

Zip Code

95746-6158

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1126.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17082754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Patricia A. Doss

Mailing Address 23717 Rockrose Drive

City

Golden

State

CO

Zip Code

80401-9185

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17092754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

628.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas D. Hegna

Mailing Address 16931 E Jacklin Drive

City

Fountain Hills

State

AZ

Zip Code

85268-5446

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17162754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald Karkela

Mailing Address 820 Recluse Court

City

Casper

State

WY

Zip Code

82609-3380

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17202754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Mangala K. Pai-Panandiker

Mailing Address 19425 Vineridge Road

City

Excelsior

State

MN

Zip Code

55331-9173

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17222754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

503.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jim Johnson

Mailing Address 1635 Cliff Avenue

City

Duluth

State

MN

Zip Code

55811-2101

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17262754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Terry K. Lewis

Mailing Address 5612 Dale Avenue

City

Edina

State

MN

Zip Code

55436-2469

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17342754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Don R. Schaefer

Mailing Address 16621 X Street

City

Omaha

State

NE

Zip Code

68135-2373

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17362754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

363.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Martha Olmstead

Mailing Address 1800 Chestnut Street

City

Berkeley

State

CA

Zip Code

94702-1405

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17392754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Craig Roslien

Mailing Address 4210 Queens Way

City

Minnetonka

State

MN

Zip Code

55345-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17422754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Marilyn L. McClain

Mailing Address 208 Parkwild Drive

City

Council Bluffs

State

IA

Zip Code

51503-1759

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17542754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

241.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dennis J. Bell

Mailing Address 10576 Sunset Terrace

City

Clive

State

IA

Zip Code

50325-6554

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17572754

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory D. Jensen

Mailing Address 16850 Berkshire Court

City

Sw Ranches

State

FL

Zip Code

33331-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17602754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Linda L. Silver

Mailing Address 4415 State Street
Apt. 2

City

Bettendorf

State

IA

Zip Code

52722-6328

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17672754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

340.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brad L. Willson

Mailing Address 4905 Elm Street

City

Bellaire

State

TX

Zip Code

77401-2810

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17682754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Glen Jones

Mailing Address 4312 Shiloh Trace

City

Valdosta

State

GA

Zip Code

31602-2393

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17872754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Troy G. Braswell

Mailing Address 16843 Hghld Ridge Drive

City

Belton

State

MO

Zip Code

64012

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17902754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

316.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Galen D. Dody

Mailing Address 501 David Drive

City

Clinton

State

MO

Zip Code

64735-1948

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR17932754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David A. Lyons

Mailing Address 405 Barrett Road

City

Lawrence

State

NY

Zip Code

11559-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18042754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joel P. Blanchard

Mailing Address 5608 S Deer Park Drive

City

Sioux Falls

State

SD

Zip Code

57108-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18222754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

480.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Greg Blanchard Clu Chfc

Mailing Address 4720 W 127th Place

City

Broomfield

State

CO

Zip Code

80020-5737

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18232754

Amount of Each Receipt this Period

66.67

P/R Deduction (\$66.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Vern O. Bills

Mailing Address 826 National

City

Belle Fourche

State

SD

Zip Code

57717-2032

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18252754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. David L. Jorgenson

Mailing Address 25769 Highway 37

City

Mitchell

State

SD

Zip Code

57301-5812

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18262754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

151.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Rich Garry

Mailing Address 805 Batcheller Lane

City

Sioux Falls

State

SD

Zip Code

57105-6715

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18292754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steve Garry

Mailing Address 2600 East Orchard Trail

City

Sioux Falls

State

SD

Zip Code

57103

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18302754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Christine M. Park

Mailing Address 97 Asbury Avenue

City

Ocean Grove

State

NJ

Zip Code

07756-1472

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18332242754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

391.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Craig A. Merdian

Mailing Address 40 Bovensiepen Court

City

Roseland

State

NJ

Zip Code

07068-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

E.V.P. & Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18332862754

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steven D. Lash

Mailing Address 66 Everett Road

City

Demarest

State

NJ

Zip Code

07627-1225

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18333572754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Roger H. Morris

Mailing Address 2101 N Westwood Avenue

City

Santa Ana

State

CA

Zip Code

92706-1943

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18392754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

432.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Edward P. Linder

Mailing Address 11 Sable Court

City

Barnegat

State

NJ

Zip Code

08005

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1842754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mike Norman

Mailing Address 5977 Blue Hills Court

City

Reno

State

NV

Zip Code

89502-8708

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18462754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Shane M. Swanson

Mailing Address 316 E Ranney Avenue

City

Vernon Hills

State

IL

Zip Code

60061-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18552754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

363.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Chip May

Mailing Address 2009 Royal Club Court

City

Arlington

State

TX

Zip Code

76017-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18622754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John R. Meyer

Mailing Address 996 Stafford Avenue

City

Staten Island

State

NY

Zip Code

10309-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1862754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Guy Richardson

Mailing Address 1151 Southwest Mission Avenue

City

Topeka

State

KS

Zip Code

66604-1856

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18662754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

497.46

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Royse J. Huff

Mailing Address 506 Fairway Place

City

Fairfield

State

IA

Zip Code

52556-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	8

Transaction ID: PR18672754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. O. L. Elrick, Jr.

Mailing Address 1440 N Gatewood
#51

City

Wichita

State

KS

Zip Code

67206-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	8

Transaction ID: PR18842754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin R. Johnson

Mailing Address 100 Street of Dreams

City

Village of Loch LI

State

MO

Zip Code

64012-4179

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	8

Transaction ID: PR18852754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. C. L. Meigs

Mailing Address 20040 Southeast Grandview Avenue

City

Pratt

State

KS

Zip Code

67124-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18872754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John J. McKenna, Jr.

Mailing Address 3924 Baxter Lane
PO Box 11532

City

Bozeman

State

MT

Zip Code

59719-1532

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18912754

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. David S. Sell

Mailing Address 60 Revere Lane

City

Fairfield

State

CT

Zip Code

06824-7829

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18927312754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

305.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Rakesh Bansal

Mailing Address 1 Horseshoe Court

City

Monroe

State

NJ

Zip Code

08831-2368

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1892754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John P. Schwan

Mailing Address 1320 N Arch

City

Aberdeen

State

SD

Zip Code

57401-2147

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1892754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Scott Alexander

Mailing Address 16252 Placerita Canyon Road

City

Santa Clarita

State

CA

Zip Code

91321-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR18982754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

500.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Janice L. Orton

Mailing Address 9032 Maple Hill Drive

City

Boise

State

ID

Zip Code

83709-0523

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19062754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeff Marsh

Mailing Address 1749 W 15th Avenue

City

Torrington

State

WY

Zip Code

82240-3706

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19172754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Don R. Fengler

Mailing Address 10321 Newcomb

City

Whittier

State

CA

Zip Code

90603-2625

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19222754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

158.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David R. Somerville, Jr.

Mailing Address 725 Rosarita

City

Fullerton

State

CA

Zip Code

92835-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19262754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Murray Pruetz

Mailing Address 2626 W Walatowa

City

Phoenix

State

AZ

Zip Code

85041-9626

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19322754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. James J. Killgore

Mailing Address 4123 Campus Green Lp

City

Lacey

State

WA

Zip Code

98516-6241

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19332754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott Maycock

Mailing Address 359 County Road 250

City

Durango

State

CO

Zip Code

81301-6976

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19342754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph L. Tigert

Mailing Address 8620 Brentmoor Street

City

Wichita

State

KS

Zip Code

67206-2404

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19432754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Kap-Sun Enders

Mailing Address 10620 Washington Circle

City

Anchorage

State

AK

Zip Code

99515-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19502754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

322.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Steven T. Mindak

Mailing Address 9290 E Thompson Peak Parkway
Lot 412

City State Zip Code
Scottsdale AZ 85255-4514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19522754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Carrie L. Hall

Mailing Address 5628 E Monterosa Street

City State Zip Code
Phoenix AZ 85018-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19532754

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jan Christensen

Mailing Address 2356 E Bearhills Drive

City State Zip Code
Draper UT 84020-9672

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19712754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

566.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Donna L. Del Mastro

Mailing Address 610 the Village
#306

City State Zip Code
Redondo Beach CA 90277-2708

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19752754

Amount of Each Receipt this Period

34.66

P/R Deduction (\$34.66 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John J. De Buono

Mailing Address 2128 Bluerock Circle

City State Zip Code
Concord CA 94521-1670

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Zone Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19762754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. William C. Gallagher

Mailing Address 8991 S Cobble Canyon

City State Zip Code
Sandy UT 84093

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19792754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

132.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Wallace

Mailing Address 1654 Wheatgrass Court

City

Reno

State

NV

Zip Code

89509-6912

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19802754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary Bacon

Mailing Address 1099 Kentfield Drive

City

Salinas

State

CA

Zip Code

93901-1067

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19842754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bob D. Hall

Mailing Address 2015 Evergreen Court

City

Yakima

State

WA

Zip Code

98909-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19862754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Claire M. Nagel

Mailing Address 101 Shore Drive

City

North Cape May

State

NJ

Zip Code

08204-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR1992754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Rick G. Austin

Mailing Address 6509 Claret Court

City

Kansas City

State

MO

Zip Code

64152-6084

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR19942754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Bakke

Mailing Address 3865 Welsh Pony Lane

City

Yorba Linda

State

CA

Zip Code

92886-7929

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20052754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

423.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 93 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. R. M. Bren

Mailing Address 1106 Missouri Street

City

Grandview

State

WA

Zip Code

98930-1409

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20102754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Sharon A. Rockett

Mailing Address 310 6th Street

City

Raymond

State

WA

Zip Code

98577-2503

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20112754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Dan Fortier

Mailing Address 8706 Webster Avenue

City

Yakima

State

WA

Zip Code

98908-9309

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20172754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

234.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gordon D. Schuster

Mailing Address 1230 Leanne Place

City

Wenatchee

State

WA

Zip Code

98801-3253

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20202754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Melvin J. Feinberg

Mailing Address 1816 E 5th Street

City

Brooklyn

State

NY

Zip Code

11223-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2032754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jack Whitehead

Mailing Address 20782 Southwest Hillboro Hy

City

Newberg

State

OR

Zip Code

97132-9412

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20352754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

390.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert L. Cannon, III

Mailing Address 30700 19th Avenue S

City

Federal Way

State

WA

Zip Code

98003-5103

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20392754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Fincham, Jr.

Mailing Address 19333 Soda Springs Drive

City

Bend

State

OR

Zip Code

97702-1091

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20422754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John B. Whitehead

Mailing Address 11365 Southwest Bobwhite Place

City

Beaverton

State

OR

Zip Code

97007

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20432754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

324.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Beck

Mailing Address 679 Lincoln Street

City

Santa Clara

State

CA

Zip Code

95050-5318

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20442754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Victoria Simmaly

Mailing Address 235 Flournoy Street

City

San Francisco

State

CA

Zip Code

94112-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20532754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Armondo Brennan

Mailing Address 8315 North 22 Lane

City

McAllen

State

TX

Zip Code

78504-5733

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20542754

Amount of Each Receipt this Period

32.00

P/R Deduction (\$32.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

123.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Yoshio Kinjo

Mailing Address 241 S Peralta Hills Drive

City

Anaheim

State

CA

Zip Code

92807-3425

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20602754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Barbara L. Cole

Mailing Address 1052 S Laughingbrook Court

City

Anaheim

State

CA

Zip Code

92808-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20612754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jack Acomb

Mailing Address 1762 Vista Del Lago

City

Fallbrook

State

CA

Zip Code

92028-1748

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20672754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

196.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John H. Horstmann

Mailing Address 804 Country View Circle

City

Fresno

State

CA

Zip Code

93730-0725

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20692754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Katherine Huebert

Mailing Address 294 Robinwood Circle

City

Reedley

State

CA

Zip Code

93654-2767

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20702754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William V. Brody

Mailing Address 19 Corte Miguel

City

San Rafael

State

CA

Zip Code

94903-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20782754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

251.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Stanley F. Goodin

Mailing Address 6117 Carriage Hse Way

City

Reno

State

NV

Zip Code

89519-7324

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20822754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Alan Smith

Mailing Address 12775 Saratoga Creek Drive

City

Saratoga

State

CA

Zip Code

95070-3540

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20952754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Christie S. Mueller

Mailing Address 6841 Ripley Lane N

City

Renton

State

WA

Zip Code

98056-1529

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR20992754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

176.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen C. Dill

Mailing Address 4082 Prestwick Lane

City

Palmdale

State

CA

Zip Code

93551-5381

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21022754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard S. Ragus

Mailing Address 3149 Dragonfly Street

City

Glendale

State

CA

Zip Code

91206-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21032754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert H. Perry

Mailing Address 1227 E Meadow Ridge Road

City

Sandy

State

UT

Zip Code

84094-5713

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21042754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

209.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Louis L. Murray, Jr., .

Mailing Address 71 Manthorpe Road Apt. 2

City

West Roxbury

State

MA

Zip Code

02132-4426

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211442754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John P. Mosley

Mailing Address 24 Pitt Street

City

Portland

State

ME

Zip Code

04103-4824

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211462754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Narottam N. Patel

Mailing Address 10 B Ashwood Mall

City

Old Bridge

State

NJ

Zip Code

08857-4517

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211722754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

163.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Deborah Lewis

Mailing Address 1300 S Arlington Ridge
#314

City State Zip Code
Arlington VA 22202-1964

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211732754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. E. Mark Lewis

Mailing Address 1751 2nd Avenue
Apt. 20 F

City State Zip Code
New York NY 10128-5363

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211752754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Rosie Franklin

Mailing Address 7019 Rock Dove Court

City State Zip Code
Charlotte NC 28277-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211782754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

118.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark Heinemann

Mailing Address 1 Hanford Street

City

Melville

State

NY

Zip Code

11747-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211892754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John A. Forte

Mailing Address 1 Chandler Drive

City

Ballston Lake

State

NY

Zip Code

12019-1335

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211922754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. David Brown

Mailing Address 524 Terrace Avenue

City

Garden City

State

NY

Zip Code

11530-5442

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211942754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Otto A. Kuehne

Mailing Address 6213 Ranch View Drive

City

East Amherst

State

NY

Zip Code

14051-2094

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR211992754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Memo Morantes

Mailing Address 2019 Menalto Avenue

City

Menlo Park

State

CA

Zip Code

94025-2658

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21202754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ronnie D. Weller

Mailing Address Hc#2 Box 146E

City

Tionesta

State

PA

Zip Code

16353-9208

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212132754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

139.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Dietz

Mailing Address 14 Cardinal Drive

City

Poughkeepsie

State

NY

Zip Code

12601-5719

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212152754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John E. Horstmann

Mailing Address 7684 Kincaid

City

Fresno

State

CA

Zip Code

93711-0363

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21222754

Amount of Each Receipt this Period

90.00

P/R Deduction (\$90.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John T. Alexander

Mailing Address 372 Baymount Drive

City

Statesville

State

NC

Zip Code

28625-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212342754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

213.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott McKnight

Mailing Address 520 Pitchercane Road

City

Hot Springs

State

AR

Zip Code

71901-8402

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212452754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael P. Daly

Mailing Address 1426 State Route 125

City

Hamersville

State

OH

Zip Code

45130-9509

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212492754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Curt Carey

Mailing Address 952 Meadowood Lane

City

Hudson

State

WI

Zip Code

54016-7518

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212682754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

246.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Todd Olig

Mailing Address 1006 Dewey Street

City

Kiel

State

WI

Zip Code

53042-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212732754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Oscar A. Anzaldo

Mailing Address 2704 Bonniebrook

City

Stockton

State

CA

Zip Code

95207-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21282754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joe Littlejohn

Mailing Address 111 Robert E Lee Place

City

Bossier City

State

LA

Zip Code

71111-5025

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212952754

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

142.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Budo Perry

Mailing Address 305 S Soctt

City

Fort Gibson

State

OK

Zip Code

74434-8722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR212992754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gene Silvis

Mailing Address 9837 E 85th Street

City

Tulsa

State

OK

Zip Code

74133-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213002754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Sanford Bressick

Mailing Address 611 El Dorado Court

City

Santa Rosa

State

CA

Zip Code

95404-2116

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21302754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. S. C. Patterson

Mailing Address 1501 Presto Way Northwest

City

Albuquerque

State

NM

Zip Code

87104-2396

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213072754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Zerbe M. Mellish

Mailing Address 2503 Valleyfield

City

Houston

State

TX

Zip Code

77080-4406

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213112754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry M. Fish

Mailing Address 16 Waterford Lane

City

Beachwood

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21312754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Wee-
kly)

SUBTOTAL of Receipts This Page (optional)

355.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Sue Zwiener

Mailing Address 10630 Dodge Mower Road

City

Bloomington

State

MN

Zip Code

55917-6934

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213242754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Wiskus

Mailing Address 1005 Edgewater Drive

City

Pella

State

IA

Zip Code

50219-7669

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213342754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Brown

Mailing Address 8976 Northeast Patton Road

City

Hamilton

State

MO

Zip Code

64644-9166

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213412754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

SUBTOTAL of Receipts This Page (optional)

233.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 311

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ron Meeker

Mailing Address 804 N Dubuque

City

Sioux Falls

State

SD

Zip Code

57110-5825

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213432754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Bookout

Mailing Address 24760 Eagle River Road

City

Eagle River

State

AK

Zip Code

99577

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213492754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Brian K. Freckleton

Mailing Address 3830 Saddleback Road

City

Park City

State

UT

Zip Code

84098-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213552754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

147.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard S. Wallace

Mailing Address 1640 Northeast 156th Avenue

City

Portland

State

OR

Zip Code

97230-5323

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213602754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Werner

Mailing Address 1380 King James Court

City

Oak Park

State

CA

Zip Code

91377-4738

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21362754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joe Hong

Mailing Address 317 Edgewater Drive

City

Milpitas

State

CA

Zip Code

95035-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213672754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

280.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Forrest G. Hindley

Mailing Address 17609 White Marble Drive

City

Monument

State

CO

Zip Code

80132-7445

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21382754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Annamalai Palani

Mailing Address 5837 Corte Mente

City

Pleasanton

State

CA

Zip Code

94566-5872

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213842754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Eric K. Takao

Mailing Address 752 Pahumele Place

City

Kailua

State

HI

Zip Code

96734-3513

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR213862754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bill Regan, III

Mailing Address 790 Bromfield Road

City

San Mateo

State

CA

Zip Code

94402-1115

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR214022754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jerry Sullivan

Mailing Address 204 Paseo Arboles

City

Fairfield

State

CA

Zip Code

94534-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR214032754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Leslie Coddington

Mailing Address 626 Fitzsimmons Road

City

Milan

State

NY

Zip Code

12571

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
A.V.P. - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR214162754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

226.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Jeanne M. Carbone

Mailing Address 669 Pelham Road
Apt. C2

City State Zip Code
New Rochelle NY 10805-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.81

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2142754

Amount of Each Receipt this Period

86.55

P/R Deduction (\$28.85 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jerry Macias

Mailing Address 1530 Avenida Quintas

City State Zip Code
Las Cruces NM 88001-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21432754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Angelo A. Haddad

Mailing Address 354 Garnsey Avenue

City State Zip Code
Bakersfield CA 93309-1849

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21452754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

303.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Patrick D. Miller

Mailing Address 265 Mountaincrest Road

City

Duarte

State

CA

Zip Code

91010-1537

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21472754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Philip A. Vignola

Mailing Address 3 Strawberry Knoll Court

City

Fort Salonga

State

NY

Zip Code

11768-2646

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2152754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kevin Choi

Mailing Address 4442 Saint Clair Avenue

City

Studio City

State

CA

Zip Code

91604-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR215312754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

349.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Zaniewski

Mailing Address 4196 Pacifico Lane

City

Las Vegas

State

NV

Zip Code

89135-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Life Product Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR215332754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Jeannette L. Meitz

Mailing Address 3734 Vancouver Drive

City

Reno

State

NV

Zip Code

89511-6048

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

National Life Sales Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR215342754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rick K. Stivers

Mailing Address 7564 Linidisfarne Lane

City

Franklin

State

TN

Zip Code

37064-6256

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21542754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

299.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Polilli

Mailing Address 4522 Perdita Lane

City

Lutz

State

FL

Zip Code

33558-9079

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President & Actuary

Aggregate Year-to-Date ▼

461.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR215452754

Amount of Each Receipt this Period

105.79

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Larry Tover

Mailing Address 4839 Hermano Drive

City

Tarzana

State

CA

Zip Code

91356-4517

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21552754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Debra A. Bronzo

Mailing Address 21 Di Rubbo Drive

City

Cortlandt Manor

State

NY

Zip Code

10567-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR215552754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

207.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Albert J. Schiff

Mailing Address 11 Mohawk Lane

City

Greenwich

State

CT

Zip Code

06831-3125

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR215592754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Suzanne W. Sanford

Mailing Address 32055 Southwest Arbor Lake Drive

City

Wilsonville

State

OR

Zip Code

97070-9415

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21562754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Tony Bolado

Mailing Address 698 N Helena

City

Anaheim

State

CA

Zip Code

92805-2620

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21682754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

340.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Cynthia R. Bolker

Mailing Address 147 27th Street

City

Del Mar

State

CA

Zip Code

92014-2043

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21712754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ray Triplett

Mailing Address 16171 Hillvale Avenue

City

Monte Sereno

State

CA

Zip Code

95030-4159

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21722754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William S. Anders

Mailing Address 15 Grand Place

City

Newtown

State

CT

Zip Code

06470-2113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Management Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21762754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

323.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Nicholas J. Smaldino

Mailing Address 1804 E Chelsea

City

Fresno

State

CA

Zip Code

93720-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21812754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas G. Sawicki

Mailing Address 114 Bushwick Road

City

Poughkeepsie

State

NY

Zip Code

12603-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2182754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Tom Cox

Mailing Address 21837 Junebug Road

City

Grass Valley

State

CA

Zip Code

95949-8998

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21842754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Nick Ameli, Jr.

Mailing Address 4113 Coal Heritge Road

City

Bluewell

State

WV

Zip Code

24701-9193

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR218812754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John Wolff

Mailing Address 120 Willow Avenue

City

Roseville

State

CA

Zip Code

95678-3232

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR218892754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Doug Wills

Mailing Address 12410 W Auburn Avenue

City

Lakewood

State

CO

Zip Code

80228-4986

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR218912754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bryan Buzzard

Mailing Address 3311 E Dartmouth

City

Mesa

State

AZ

Zip Code

85213-7046

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR218922754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David L. Aguirre

Mailing Address 7518 South 240 E

City

Midvale

State

UT

Zip Code

84047-2169

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR218932754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Christine Young

Mailing Address 63 Berryessa Way

City

Hillsborough

State

CA

Zip Code

94010-7301

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR21942754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. George E. Carr

Mailing Address 2791 Leo Circle

City

Riverside

State

CA

Zip Code

92503-6050

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22022754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Russell A. Curtiss

Mailing Address 4118 E 14th Street

City

Long Beach

State

CA

Zip Code

90604-3005

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22032754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Mucci

Mailing Address 87 Northgate

City

Avon

State

CT

Zip Code

06001-4077

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Chairman & Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22041262754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

291.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. L. B. Nole

Mailing Address 7689 Tahiti Lane

City

Lake Worth

State

FL

Zip Code

33467-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22072754

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Barbara J. Norman

Mailing Address 12847 Seabreeze Farms Drive

City

San Diego

State

CA

Zip Code

92130-3736

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22192754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Bassie Lee

Mailing Address 1210 Dana Avenue

City

Palo Alto

State

CA

Zip Code

94301-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22202754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

208.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Englert

Mailing Address 4948 Saratoga

City

Redding

State

CA

Zip Code

96002-9419

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22232754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard Paulsen

Mailing Address 6280 Crooked Stick Avenue

City

Stockton

State

CA

Zip Code

95219-1859

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22252754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rex Inglis

Mailing Address 2528 Tamarisk Avenue

City

Stockton

State

CA

Zip Code

95207-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22272754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

242.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James A. Allen

Mailing Address 710 Avery Street

City

South Windsor

State

CT

Zip Code

06074-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR222754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kulbhusan L. Sareen

Mailing Address 405 Darrell Road

City

Hillsborough

State

CA

Zip Code

94010-6709

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22282754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Rutledge

Mailing Address 10484 Janice Lynn Circle

City

Cypress

State

CA

Zip Code

90630-4225

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22342754

Amount of Each Receipt this Period

34.66

P/R Deduction (\$34.66 Monthly)

SUBTOTAL of Receipts This Page (optional)

315.45

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mitchell D. Rosenberg

Mailing Address 870 Camino El Carizo

City

Thousand Oaks

State

CA

Zip Code

91360-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22362754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Neelam Salmen

Mailing Address 10350 East Road

City

Redwood Valley

State

CA

Zip Code

95470-6102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22382754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gideon A. Pell

Mailing Address 61 Holbrook Drive

City

Stamford

State

CT

Zip Code

06906-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2242754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

344.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael L. Cole

Mailing Address 12516 Plaza Amada

City

San Diego

State

CA

Zip Code

92128-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22432754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Donald G. Presley

Mailing Address 4502 Obispo Avenue

City

Lakewood

State

CA

Zip Code

90712-3647

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Life Product Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22572754

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark Koskovich

Mailing Address 5717 Cavender Drive

City

Plano

State

TX

Zip Code

75093-5966

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22842754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

362.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jonathan R. Jaramillo

Mailing Address 11 Turtle Ridge Court

City

Ridgefield

State

CT

Zip Code

06877-1060

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22902754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Son Van Nguyen

Mailing Address 6474 Marigayle Circle

City

Huntington Beach

State

CA

Zip Code

92648-6728

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR22982754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Cama

Mailing Address 19 Crestwood Drive

City

East Hampton

State

CT

Zip Code

06424-1322

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2302754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

286.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Floyd W. Franks

Mailing Address 425 Blue Water Pointe Drive

City

Jasper

State

AL

Zip Code

35504-4067

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR23042754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. David Smith

Mailing Address 10810 Executive Drive
Suite 301

City

Little Rock

State

AR

Zip Code

72211

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR23072754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Peter P. Chan

Mailing Address 7805 E Starbright Court

City

Tucson

State

AZ

Zip Code

85750-7048

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR23142754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

116.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Himat Patel

Mailing Address 5763 Rosebud Court

City

Chino Hills

State

CA

Zip Code

91709-3973

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR23182754

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Anthony G. Epps

Mailing Address 15 Hartford Lane

City

White Plains

State

NY

Zip Code

10603-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2332754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$200.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Gayle A. Yeomans

Mailing Address 777 W End Avenue
Apt. 4C

City

New York

State

NY

Zip Code

10025-5551

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR23422754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

121.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Joan M. Cronin

Mailing Address 15 Steven Drive Apt. 7

City

Ossining

State

NY

Zip Code

10562-1977

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2362754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Falabella

Mailing Address 25503 147th Road

City

Rosedale

State

NY

Zip Code

11422-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2422754

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jayanti M. Patel

Mailing Address 23 Arcadian Drive

City

Wesley Hills

State

NY

Zip Code

10977-1100

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2442754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

142.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Wally Sims

Mailing Address 3 Harborview Place

City

Center Moriches

State

NY

Zip Code

11934-3432

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2472754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Veronica E. McCarthy

Mailing Address 67118 Dartmouth Street

City

Forest Hills

State

NY

Zip Code

11375-4148

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Assistant Vice President - Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2502754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Maryann Ingenito

Mailing Address 305 Edinboro Road

City

Staten Island

State

NY

Zip Code

10306-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2522754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

314.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael G. Gallo

Mailing Address 4 Red Mill Lane

City

Darien

State

CT

Zip Code

06820-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Svp - Retirement Income

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2582754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Cordell Hoffer

Mailing Address 65 Otterkill Road

City

New Windsor

State

NY

Zip Code

12533-8830

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2592754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Enrico R. Sorrentino

Mailing Address 1256 Turnbury Lane

City

North Wales

State

PA

Zip Code

19454-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2622754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

628.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dan King

Mailing Address 2000 Mountainview Drive
Suite 403

City State Zip Code
Colchester VT 05446-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR262754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Jacqueline A. O'Leary

Mailing Address 52 Clyde Street

City State Zip Code
New Hyde Park NY 11040-2433

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2642754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Solomon Goldfinger

Mailing Address 14719 70th Avenue

City State Zip Code
Flushing NY 11367-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp & Senior Advisor To the President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2672754

Amount of Each Receipt this Period

101.55

P/R Deduction (\$33.85 Weekly)

SUBTOTAL of Receipts This Page (optional)

202.55

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence Gordon

Mailing Address 200E32nd Street
Apt. 16B

City State Zip Code
New York NY 10016

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2782754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Rock

Mailing Address 8 Park Place

City State Zip Code
Short Hills NJ 07078-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp & Chief Investment Officer - L&a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2792754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Marat Gakyma

Mailing Address 340 Travis Avenue

City State Zip Code
Staten Island NY 10314-6129

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2812754

Amount of Each Receipt this Period

34.67

P/R Deduction (\$34.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

150.11

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Patrick G. Boyle

Mailing Address 7 Holmes Court

City

Morristown

State

NJ

Zip Code

07960-2776

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2852754

Amount of Each Receipt this Period

138.60

P/R Deduction (\$46.20 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Eileen T. Slevin

Mailing Address 32 Dykers Farm Road

City

North Haledon

State

NJ

Zip Code

07508-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp & Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2892754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joel A. Shapiro

Mailing Address 200 E 66th Street #302D

City

New York

State

NY

Zip Code

10021-9188

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2932754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

SUBTOTAL of Receipts This Page (optional)

279.65

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael Tobin

Mailing Address 10 Alice Lane

City

Rensselaer

State

NY

Zip Code

12144

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Legislative Vice President

Aggregate Year-to-Date ▼

269.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR2940222754

Amount of Each Receipt this Period

44.94

P/R Deduction (\$14.98 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul Delisio

Mailing Address 99 Wildflower Lane

City

Shokan

State

NY

Zip Code

12481-5322

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3042754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael M. Oleske

Mailing Address 59 the Neck

City

Manhasset

State

NY

Zip Code

11030-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Svp & Chief Tax Counsel

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3082754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

210.35

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kenneth H. Hower

Mailing Address 123 W Houston Avenue

City

Clovis

State

CA

Zip Code

93611-3537

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3192754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Barbara J. Halecki

Mailing Address 12 Lakeview Road

City

Cortlandt Manor

State

NY

Zip Code

10567-7407

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3242754

Amount of Each Receipt this Period

36.00

P/R Deduction (\$12.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Abbett P. Howland

Mailing Address 177 E 79th Street
Apt. 18A

City

New York

State

NY

Zip Code

10075-0415

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3332754

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Weekly)

SUBTOTAL of Receipts This Page (optional)

295.65

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gerard A. Rocchi

Mailing Address 789 Mountain Laurel Road

City

Fairfield

State

CT

Zip Code

06824-2426

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
Svp

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3512754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kornelia Caulo Seyfried

Mailing Address 303 Frederick Street

City

Dix Hills

State

NY

Zip Code

11746-7009

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
Agent

Aggregate Year-to-Date ▼

277.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3612754

Amount of Each Receipt this Period

34.67

P/R Deduction (\$34.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Smith

Mailing Address 39-856 Morningside Drive

City

Rancho Mirage

State

CA

Zip Code

92270-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
Agent

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3662754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

365.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Elaine Ashworth

Mailing Address 300 East 85th Street
Apt. 1404

City State Zip Code
New York NY 10028-4594

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3722754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Taigue

Mailing Address 71 Stevenson Street

City State Zip Code
Lynbrook NY 11563-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First V.P. & Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3732754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Susan K. Reeves

Mailing Address 21482 Montbury Drive

City State Zip Code
Lake Forest CA 92630-6551

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3762754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jules DelVecchio

Mailing Address 4 Sackett Circle

City

Larchmont

State

NY

Zip Code

10538-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3792754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Oliviero

Mailing Address 63 Wellington Road

City

Garden City

State

NY

Zip Code

11530-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3822754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Salvatore F. Farina

Mailing Address 99 Parkside Drive
Box 800

City

Point Lookout

State

NY

Zip Code

11569

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3852754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

363.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James M. Lauzon

Mailing Address 8 Newcastle Drive

City

Avon

State

CT

Zip Code

06001-3151

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.83

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR392754

Amount of Each Receipt this Period

57.69

P/R Deduction (\$57.69 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Frank M. Boccio

Mailing Address 18 Williamson Street

City

East Rockaway

State

NY

Zip Code

11518-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
E.V.P. & Chief Administrative Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR3942754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joseph Castro

Mailing Address 110-21 55th Avenue

City

Corona

State

NY

Zip Code

11368-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4042754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

314.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard A. Wadsworth

Mailing Address 2211 Chardonnay Terrace

City

Parrish

State

FL

Zip Code

34219-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4062754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Alison F. Souksamlane

Mailing Address 15506 Clover Ridge

City

San Antonio

State

TX

Zip Code

78248-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4092754

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Kathleen A. Donnelly

Mailing Address 47 Southview Circle

City

Lake Grove

State

NY

Zip Code

11755-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4102754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

697.45

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Eric S. Rubin

Mailing Address 419 Freeman Avenue

City

Oceanside

State

NY

Zip Code

11572-4506

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4162754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Edward J. Kaminski

Mailing Address 63 Fern Street

City

Floral Park

State

NY

Zip Code

11001-3207

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.31

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4232754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. George C. Vatore

Mailing Address 3748 Wildwood Street

City

Yorktown Heights

State

NY

Zip Code

10598-1131

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4282754

Amount of Each Receipt this Period

44.94

P/R Deduction (\$14.98 Weekly)

SUBTOTAL of Receipts This Page (optional)

391.14

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Neil Glynn

Mailing Address 9301 S Hoyne

City

Chicago

State

IL

Zip Code

60620-6306

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR438032754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Anthony L. Miller

Mailing Address 1460 S Prairie Avenue

City

Chicago

State

IL

Zip Code

60605-2884

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Second Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4382754

Amount of Each Receipt this Period

93.75

P/R Deduction (\$31.25 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bradford L. Meigs

Mailing Address 3 Harvest Lane

City

Hingham

State

MA

Zip Code

02043-4233

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR442754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

360.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James O. DeVito

Mailing Address 42 Pembroke Way

City

Bedford

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448642754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Craig A. Forman

Mailing Address 5020 W 18th Avenue

City

Kennewick

State

WA

Zip Code

99338-1847

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448662754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard P. Simonetti

Mailing Address 21685 Chase Drive

City

Novi

State

MI

Zip Code

48375-4765

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Head of Recruiting/Retention & Mgmt. D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448682754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

346.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kinh-Huu Lam

Mailing Address 991 Lurline Drive

City

State

Zip Code

Foster City

CA

94404-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448722754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Darin Fass

Mailing Address 30 Carlton Drive

City

State

Zip Code

Mount Kisco

NY

10549-4756

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448732754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steven J. Kramer

Mailing Address 111 W Ravine Court

City

State

Zip Code

Mequon

WI

53092-5861

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448742754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William Grub

Mailing Address 27 Desantis Drive

City

Highland Mills

State

NY

Zip Code

10930-3419

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448752754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory D. Tyson

Mailing Address 1122 Garden Street

City

Hoboken

State

NJ

Zip Code

07030-4305

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448782754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Amelia Scott

Mailing Address 3920 Arkwright Road
Suite 160

City

Macon

State

GA

Zip Code

31210-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448802754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

403.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Romany S. Abraham

Mailing Address 3350 Hampshire Road

City

State

Zip Code

Furlong

PA

18925-1254

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448812754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brett Bargery

Mailing Address 505 Liberty Court

City

State

Zip Code

Colleyville

TX

76034-7619

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448842754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Blake

Mailing Address 105 Meadow Ridge Road

City

State

Zip Code

Warwick

NY

10990-2569

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448852754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

248.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David A. Harland

Mailing Address 200 E 66th Street
Apt. A-1903

City State Zip Code
New York NY 10065-9179

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Fvp & Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448902754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Hodgkiss

Mailing Address 5824 Fairmount Avenue

City State Zip Code
Downers Grove IL 60516-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1089.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448912754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. George M. Kay

Mailing Address 300 Ivy Springs Court

City State Zip Code
Waxhaw NC 28173

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448922754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

461.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph J. La Pietra

Mailing Address 12601 Split Creek Court

City

North Potomac

State

MD

Zip Code

20878-3999

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448932754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark J. Madgett

Mailing Address 24634 Southeast 9th Place

City

Sammamish

State

WA

Zip Code

98074-3447

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448952754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry B. McKinney

Mailing Address 2601 25th Street Southeast
Suite 350

City

Salem

State

OR

Zip Code

97302-1283

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1077.06

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448962754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

692.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Roland Ghazal

Mailing Address 3111 Danielle Court

City

Livermore

State

CA

Zip Code

94550-6888

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448972754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Joyce B. Russell

Mailing Address 1005 Fraser Avenue Southeast

City

Huntsville

State

AL

Zip Code

35801-3138

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior G.O. Agency Standards Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448982754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kenneth N. Savoie

Mailing Address 5383 Chaucers Court

City

Roanoke

State

VA

Zip Code

24018-4600

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.62

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR448992754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

305.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Scovel

Mailing Address 20 W Mundhank Road

City

South Barrington

State

IL

Zip Code

60010-9557

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449002754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeff Bacchas

Mailing Address 8 Gregory Court

City

Farmingville

State

NY

Zip Code

11738-4203

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449042754

Amount of Each Receipt this Period

67.50

P/R Deduction (\$22.50 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mehmood N. Daya

Mailing Address 22106 Grand Cove Court

City

Katy

State

TX

Zip Code

77450-8097

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449052754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

413.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Troy K. Holman

Mailing Address 210 Quisset Lane

City

Wayne

State

PA

Zip Code

19087-2185

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449072754

Amount of Each Receipt this Period

105.00

P/R Deduction (\$35.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kyle T. Williamson

Mailing Address 6805 Beckworth Lane

City

Plano

State

TX

Zip Code

75024-7536

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449122754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert P. Mason

Mailing Address 7 Glarus Court

City

Fairport

State

NY

Zip Code

14450-4641

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1249.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449142754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

395.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott A. Cleveland

Mailing Address 1233 E Riversong Drive

City
Eagle

State
ID

Zip Code
83616-5568

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449172754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Sandra C. Ngo

Mailing Address 622 Ruscello Court

City

El Dorado Hills

State

CA

Zip Code
95762-5531

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - China Regional Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449192754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Elaine Williams

Mailing Address 503 Webster Avenue

City

Uniondale

State

NY

Zip Code
11553-1841

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449202754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

160.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Heck

Mailing Address 500 Cliffwood Avenue
Apt. #D-9

City State Zip Code
Matawan NJ 07747-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Financial Analysis Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR449222754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary D. Lamons

Mailing Address 7010 Molluk Way

City State Zip Code
Clayton CA 94517-1930

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR455382754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Gavin

Mailing Address 117 Allenhurst Circle

City State Zip Code
Franklin TN 37067-7272

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.24

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR455482754

Amount of Each Receipt this Period

40.38

P/R Deduction (\$13.46 Weekly)

SUBTOTAL of Receipts This Page (optional)

160.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 311

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kelly S. Dowell

Mailing Address 165 Clubhouse Circle

City

Fairhope

State

AL

Zip Code

36532-3384

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

809.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR455522754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. William P. Tate

Mailing Address 29355 Regency Circle

City

Westlake

State

OH

Zip Code

44145-6705

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Service Center Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR455572754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joseph C. Suellentrop

Mailing Address 9401 Redbud Lane

City

Lenexa

State

KS

Zip Code

66220-3437

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR455612754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

346.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph M. Bennett

Mailing Address 1432 Holiday Park Drive

City

Wantagh

State

NY

Zip Code

11793-2540

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4562754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Dominick Nuzzi

Mailing Address 21 Chambry Court

City

Freehold

State

NJ

Zip Code

07728-9067

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4582754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. James P. McNicholas

Mailing Address 32 Kinzley Street

City

Little Ferry

State

NJ

Zip Code

07643-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR467682754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

174.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David L. Brass

Mailing Address 541 Polaris Street

City

North Babylon

State

NY

Zip Code

11703-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Regional Manager - Life Product Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4702754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph M. Franklin

Mailing Address 33 Round Hill Road

City

Washingtonvle

State

NY

Zip Code

10992-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4762754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Pinkos

Mailing Address 16 Carolyn Terrace

City

Chicopee

State

MA

Zip Code

01020-3543

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR482754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

129.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Vishnu Patel

Mailing Address 108-28 63 Drive

City

Forest Hills

State

NY

Zip Code

11375-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR4942754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Leiderman

Mailing Address 8491 Egret Lakes Lane

City

West Palm Beach

State

FL

Zip Code

33412-1526

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5032754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Dipalermo

Mailing Address 3297 Padilla Way

City

San Jose

State

CA

Zip Code

95148-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5042754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

192.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David R. Tarella

Mailing Address 489 Stage Road

City

Charlton

State

NY

Zip Code

12019-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5092754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brian M. O'Neill

Mailing Address 45 Saint Michaels Te

City

Carmel

State

NY

Zip Code

10512-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
V.P. & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5102754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Mary Hallahan

Mailing Address 172 Wayne Avenue

City

River Edge

State

NJ

Zip Code

07661-1106

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5122754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

214.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Irving Flamer

Mailing Address 3 Linden Lane

City

Old Westbury

State

NY

Zip Code

11568-1609

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5192754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas P. Shea

Mailing Address 20 Makanna Drive

City

Huntington

State

NY

Zip Code

11743-2935

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5272754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert B. O'Neill

Mailing Address 6080 Cabotage Road

City

Duluth

State

GA

Zip Code

30097-8476

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Cvp - Zone Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5292754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

317.46

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Howard Levy

Mailing Address 14 Strafford Lane

City

Bedford

State

NH

Zip Code

03110-4536

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1081.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR5342754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert H. Petrocelli, Jr.

Mailing Address 10 Byrd Street

City

Rye

State

NY

Zip Code

10580-2407

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR5372754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Jeanmarie A. Deliso

Mailing Address 43 Primrose Drive

City

Longmeadow

State

MA

Zip Code

01106-2531

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR540192754

Amount of Each Receipt this Period

83.00

P/R Deduction (\$83.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

397.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Jenny S. Louie

Mailing Address 72-16 267th Street

City

Floral Park

State

NY

Zip Code

11004-1022

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR540332754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Andrew W. Rawding

Mailing Address 19 Herald Drive

City

Queensbury

State

NY

Zip Code

12804-9187

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR540602754

Amount of Each Receipt this Period

135.00

P/R Deduction (\$45.00 Wee-
kly)

C.

Full Name (Last, First, Middle Initial)

Ms. Adrian L. Williams

Mailing Address 20008 Northwest 85th Avenue

City

Miami

State

FL

Zip Code

33015-6933

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR540802754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Mary Joanne Petretto

Mailing Address 1468 West Street

City

Gulford

State

CT

Zip Code

06437-1075

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542112754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jude A. Watters

Mailing Address 301 Thelma Drive
#415

City

Casper

State

WY

Zip Code

82609-2325

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542232754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. B. S. Hadley

Mailing Address 482 Acorn Lane

City

Shelburne

State

VT

Zip Code

05482-6393

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542252754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Wayne Thomas

Mailing Address 29 Cycas Drive

City

Kenner

State

LA

Zip Code

70065-6188

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542492754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Hartman

Mailing Address 1351 Fairway

City

Kyle

State

TX

Zip Code

78640-8767

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542562754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Aeramy Porter

Mailing Address 8024 Greenbriar Court

City

Wichita

State

KS

Zip Code

67226-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542822754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

157.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Wesley M. Teterud

Mailing Address 11613 E 48th

City

Spokane

State

WA

Zip Code

99206-9494

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542842754

Amount of Each Receipt this Period

34.67

P/R Deduction (\$34.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ben Freedman

Mailing Address 143 Amoretti

City

Lander

State

WY

Zip Code

82520-2816

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR542862754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Ms. Linda Hulbert

Mailing Address PO Box 81402

City

Fairbanks

State

AK

Zip Code

99708-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5442754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

126.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Barry

Mailing Address 3 Evergreen Lane

City

Walpole

State

MA

Zip Code

02081-2142

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR547622754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kris Gulbran

Mailing Address 3236 Cascadia Avenue S

City

Seattle

State

WA

Zip Code

98144-7024

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR547672754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Todd Purich

Mailing Address 6332 Battlevue Drive

City

Raleigh

State

NC

Zip Code

27613-7148

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR547682754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey E. Thol

Mailing Address 736 High Street

City

Honesdale

State

PA

Zip Code

18431-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR547712754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael B. Marshall

Mailing Address 57 Sunset Drive

City

North Salem

State

NY

Zip Code

10560-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR552754

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Missy Gaynor

Mailing Address 180 Peace Acre Lane

City

Stratford

State

CT

Zip Code

06497-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR552754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

167.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Frank Scarpa

Mailing Address 5 Abbington Way

City

Morristown

State

NJ

Zip Code

07960-3314

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5592754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Roberto Recine

Mailing Address 12800 Cumberland Circle

City

Anchorage

State

AK

Zip Code

99516-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5612754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Akshay Madan

Mailing Address 775 Oneida Trail

City

Franklin Lakes

State

NJ

Zip Code

07417-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior V.P. - Northeastern Agencies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5652754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

576.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Broderick Cfp

Mailing Address 170 Clapboard Tree Street

City

Westwood

State

MA

Zip Code

02090-2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR566152754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Don L. Lippencott

Mailing Address 5790-3 North Marina Drive

City

Sabastian

State

FL

Zip Code

32958-8020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR566162754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jeff Perryman

Mailing Address 270 Spectacular Street

City

Henderson

State

NV

Zip Code

89052-5907

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR566172754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

266.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James M. Smith

Mailing Address 6414 Hickorycrest Drive

City

Spring

State

TX

Zip Code

77389-5230

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR566282754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Laura Hogan

Mailing Address 119 Apple Hill Road

City

Brewster

State

NY

Zip Code

10509-6162

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR566342754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Marc I. Rosenthal

Mailing Address 8207 Pinestone Court

City

Williamsville

State

NY

Zip Code

14221-8540

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR566482754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael E. Sproule

Mailing Address 16 Middle Beach Road

City

Madison

State

CT

Zip Code

06443-3053

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

E.V.P. & Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5702754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jefferson C. Boyce

Mailing Address 28 Inwood Street

City

Yonkers

State

NY

Zip Code

10704-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575122754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Barbara J. McInerney

Mailing Address 35 Sutton Place
Apt. 4E

City

New York

State

NY

Zip Code

10022-2464

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp & Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575132754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

461.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William J. Burns

Mailing Address 10 Valley Pond Road

City

Katonah

State

NY

Zip Code

10536-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

300.08

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575142754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. David L. Mussehl

Mailing Address 48 Desert Willow

City

Irvine

State

CA

Zip Code

92606

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575222754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Cheong H. Tsang

Mailing Address 1974 Troy Avenue

City

Brooklyn

State

NY

Zip Code

11234-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Partner

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575252754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

519.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ralph K. Sklar

Mailing Address 6632 Liggett Drive

City

Oakland

State

CA

Zip Code

94611-3204

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5752754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Marilyn W. Arnold

Mailing Address Box 812
32 Fieldstone Lane

City

Medford

State

NJ

Zip Code

08055-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575502754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bradley J. Jensen

Mailing Address 1625 Southeast Bristol Drive

City

Waukegan

State

IA

Zip Code

50263

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575542754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

396.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William J. Terry, III

Mailing Address 43 Winchester Road

City

Arlington

State

MA

Zip Code

02474-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575552754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. William F. Murphy

Mailing Address 233 Linkside Circle

City

Ponte Vedra

State

FL

Zip Code

32082-2034

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575562754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. David A. Odom

Mailing Address 24719 Bogey Ridge

City

San Antonio

State

TX

Zip Code

78260-4805

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575572754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

350.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James B. Moore

Mailing Address 13413 Wyngate Point

City

San Diego

State

CA

Zip Code

92130-1347

FEC ID number of contributing federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575592754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kevin E. Boland

Mailing Address 3993 Howard Hughes Parkway
#500

City

Las Vegas

State

NV

Zip Code

89169-6700

FEC ID number of contributing federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575602754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Eric Cox

Mailing Address 136 Cape May Lane

City

Mount Pleasant

State

SC

Zip Code

29464-6500

FEC ID number of contributing federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575612754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

350.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Hugh J. Smith

Mailing Address 10 Rock Road

City

Attleboro

State

MA

Zip Code

02703-4454

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR575632754

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Troeller

Mailing Address 12 Crape Myrtle Drive

City

Holmdel

State

NJ

Zip Code

07733-1529

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5822754

Amount of Each Receipt this Period

105.00

P/R Deduction (\$35.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark W. Pfaff

Mailing Address 330 Stockbridge Road

City

Charlotte

State

VT

Zip Code

05445-9356

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR5842754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

455.79

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Nicola Iannitelli

Mailing Address 148 Brittany Court

City

Clifton

State

NJ

Zip Code

07013-2672

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR586132754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert G. Karalius

Mailing Address 139 Sutcliffe Lane

City

Conshohocken

State

PA

Zip Code

19428-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR586142754

Amount of Each Receipt this Period

67.50

P/R Deduction (\$22.50 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank Lusk

Mailing Address 15185 Wood Duck Trail Northwest

City

Prior Lake

State

MN

Zip Code

55372-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR586152754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

413.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bernard J. Zweig

Mailing Address 393 West End Avenue
Apt. 9D

City State Zip Code
New York NY 10024-6141

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6022754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scot R. Bradstreet

Mailing Address PO Box 415

City State Zip Code
Stratham NH 03885-0415

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR602754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jonathan T. Paone

Mailing Address 57 Van Doren Avenue

City State Zip Code
Chatham NJ 07928-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Governmental Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR605962754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Wee-
kly)

SUBTOTAL of Receipts This Page (optional)

324.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mario W. Lazzaro, Jr.

Mailing Address 74 Sequams Lane W

City

West Islip

State

NY

Zip Code

11795-4527

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6062754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Pedro R. Marte

Mailing Address 3 George Court

City

Easton

State

PA

Zip Code

18045-2464

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR606312754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Paul M. Holmes

Mailing Address 3200 Beechleaf Court
Suite 820

City

Raleigh

State

NC

Zip Code

27604-1063

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR606412754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

218.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John S. Hamel

Mailing Address 184 Perry Avenue

City

Norwalk

State

CT

Zip Code

06850-1137

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Cvp - Meetings

Aggregate Year-to-Date ▼

817.52

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR611892754

Amount of Each Receipt this Period

144.27

P/R Deduction (\$48.09 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Johnson Kho

Mailing Address 110 Westminster Road

City

Scarsdale

State

NY

Zip Code

10583-2425

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6122754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Lester M. Wolf

Mailing Address 269 S Robinson Street

City

Baltimore

State

MD

Zip Code

21224-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Associate Sales Development Manager

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR612982754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

239.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John P. Border

Mailing Address 12720 Crown Crest Drive

City

Bakersfield

State

CA

Zip Code

93311-8568

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR613092754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ralph P. Owen

Mailing Address 3317 Highway 63

City

Bloomfield

State

IA

Zip Code

52537-8063

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR613272754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Alan Pottebaum

Mailing Address 29 Laura Drive

City

Lemars

State

IA

Zip Code

51031-2731

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR613382754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

256.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bob Chrisman

Mailing Address 2660 Augusta #G303

City

Houston

State

TX

Zip Code

77057-5867

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR613632754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Larry E. Botts

Mailing Address 3015 E Leestown Road

City

Midway

State

KY

Zip Code

40347-9769

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR613772754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Donald E. Lippencott

Mailing Address 10 Hawkins Avenue

City

Setauket

State

NY

Zip Code

11733-3911

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR613822754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

258.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Allen W. St Amour

Mailing Address 1477 Sharkey Road

City

Traverse City

State

MI

Zip Code

49686-8202

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR613932754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Wei-Sheng Wang

Mailing Address 9 Orchard Way

City

Warren

State

NJ

Zip Code

07059-5060

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614082754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory P. Genovese

Mailing Address 14 Woodcutters Lane

City

Cold Spring Harbor

State

NY

Zip Code

11724-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614162754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

291.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Randall D. Hart

Mailing Address 3547 State Route 7

City

New Waterford

State

OH

Zip Code

44445-8719

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614242754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Russell Bicker

Mailing Address 125 Poplar Forest Drive

City

Slippery Rock

State

PA

Zip Code

16057-8527

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614352754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Pereira

Mailing Address 2815 E 10th Street

City

the Dalles

State

OR

Zip Code

97058-4020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614372754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

208.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Alvin R. Barnett

Mailing Address 126 Meadow Street

City

Garden City

State

NY

Zip Code

11530-6600

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614402754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Rodney S. Ferguson

Mailing Address 466 Blackwolf Run Drive

City

Wildwood

State

MO

Zip Code

63040-1571

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614462754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Mary L. Stockton

Mailing Address 3545 32nd Street

City

San Diego

State

CA

Zip Code

92104-4304

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614492754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

258.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Kanaley

Mailing Address 150 Lenox Way

City

San Francisco

State

CA

Zip Code

94127-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614522754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. William S. Bennett, Jr.

Mailing Address 20708 Northeast 90th Street

City

Redmond

State

WA

Zip Code

98053-5205

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.38

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614662754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Edward C. Han

Mailing Address 5619 Blackoak Court

City

Stockton

State

CA

Zip Code

95207-4685

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
G.O. Agency Standards Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614722754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William Schultz

Mailing Address PO Box 489

City

Shelton

State

WA

Zip Code

98584-0489

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614742754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul J. Haye

Mailing Address 6475 Dowling Road

City

Perrysburg

State

OH

Zip Code

43551-9514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614752754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Brian Ruh

Mailing Address 23702 Steintal Road

City

Kiel

State

WI

Zip Code

53042-4994

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614852754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

243.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark J. McAdams

Mailing Address 2402 Laureldale Park Lane

City

Spring

State

TX

Zip Code

77386-2974

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR614972754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Hebron

Mailing Address 231 Wyoming Avenue

City

Maplewood

State

NJ

Zip Code

07040-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6152754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kurt Anderson

Mailing Address 13038 Village Chase Circle

City

Tampa

State

FL

Zip Code

33618-8359

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Development Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR615472754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

280.82

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jonathan B. Swaney

Mailing Address 3 Muirfield Road

City

Falmouth

State

ME

Zip Code

04105-1178

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR615662754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Barry A. Schub

Mailing Address 4 Wren Court

City

Morristown

State

NJ

Zip Code

07960-6346

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR615692754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Michele M. Kenaga

Mailing Address 3 Pequot Drive

City

Norwalk

State

CT

Zip Code

06855-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR615722754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

248.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Charles Rivera

Mailing Address 2401 N Pershing Street

City

Wichita

State

KS

Zip Code

67220-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6232754

Amount of Each Receipt this Period

32.00

P/R Deduction (\$32.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Carluccio, Sr., Sr.

Mailing Address 1206 Southwest Catalina Street

City

Palm City

State

FL

Zip Code

34990-3879

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6282754

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ron Rapp

Mailing Address #10 Cottonwood Landing
101 East 4th Street

City

South Sioux City

State

NE

Zip Code

68776-1761

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR632092754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

98.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 195 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Alan H. Shortell

Mailing Address 161 Farrington Avenue

City

Sleepy Hollow

State

NY

Zip Code

10591-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR632162754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. James T. Bain

Mailing Address 56 Lorijeane Lane

City

East Northport

State

NY

Zip Code

11731-4120

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

First Vice President

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6322754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Julia A. Warren

Mailing Address 78 Crest Drive

City

South Orange

State

NJ

Zip Code

07079-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Managing Director

Aggregate Year-to-Date ▼

1077.06

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6332754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

333.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James J. Coffee

Mailing Address 327 Lakeside Dr. N

City

Forked River

State

NJ

Zip Code

08731-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Cvp - Systems

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6372754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Diane H. Gould

Mailing Address 1102 Prospect Hill Place

City

Rockville

State

MD

Zip Code

20850-2868

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6382754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bernee V. Kapili M.D.

Mailing Address 200 East End Avenue
Apt. 14G

City

New York

State

NY

Zip Code

10128-7891

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

First Vice President

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642422754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

339.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Paul B. Whitman

Mailing Address 29 Broad Hill Circle

City

Guilford

State

CT

Zip Code

06437-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Assistant General Counsel

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642472754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark E. Arning

Mailing Address 25 Schuyler Avenue

City

Rockville Center

State

NY

Zip Code

11570-2521

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Svp & General Auditor

Aggregate Year-to-Date ▼

223.88

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642492754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Arthur H. Seter

Mailing Address 1 Merion Drive

City

Purchase

State

NY

Zip Code

10577-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Svp & Deputy Chief Investment Officer

Aggregate Year-to-Date ▼

1077.06

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642662754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

403.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 198 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Carol S. Mayer

Mailing Address 16 Rolling Ridge Road

City

U Saddle River

State

NJ

Zip Code

07458-1525

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

V.P. & Associate General Counsel

Aggregate Year-to-Date ▼

346.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642682754

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul K. Cunningham

Mailing Address 42 Strickland Place

City

Manhasset

State

NY

Zip Code

11030-2717

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Director

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642692754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gilberto Valdes

Mailing Address 650 6th Avenue

City

New Hyde Park

State

NY

Zip Code

11040-5458

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Governmental Affairs Vice President

Aggregate Year-to-Date ▼

201.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642722754

Amount of Each Receipt this Period

36.00

P/R Deduction (\$12.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

151.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 199 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Elizabeth W. McCarthy

Mailing Address 124 College Place

City

South Orange

State

NJ

Zip Code

07079-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1474.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642732754

Amount of Each Receipt this Period

250.02

P/R Deduction (\$83.34 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary W. Scofield

Mailing Address 45 Blydenberg Lane

City

Stonybrook

State

NY

Zip Code

11790-2123

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President & Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR642752754

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Arnheiter

Mailing Address 220 N Falmouth Highway

City

North Falmouth

State

MA

Zip Code

02556-3102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6452754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

455.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Douglas W. Pelz

Mailing Address 2404 Thomas Hill Drive

City

Coeur D Alene

State

ID

Zip Code

83815-6334

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR645432754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Ellen M. Coletto

Mailing Address 61 Chester Avenue

City

Brooklyn

State

NY

Zip Code

11218-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR647102754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Dorothea Rodd

Mailing Address 14 Old Neck Court

City

Manorville

State

NY

Zip Code

11949-3238

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR647122754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Harry W. DeHaven

Mailing Address 9065 Bethel Road

City

Gainesville

State

GA

Zip Code

30506-3963

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR647192754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. John A. Foster

Mailing Address 13 Earldom Way

City

Getzville

State

NY

Zip Code

14068

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR647202754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Karmen

Mailing Address 23 Evergreen Parkway

City

Westport

State

CT

Zip Code

06880-2529

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

V.P. & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR647212754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

190.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Gordon

Mailing Address 5 East 22nd Street
Apt. 6S

City State Zip Code
New York NY 10010-5321

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR652032754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steven M. Jacobsberg

Mailing Address 23 Hampton Court

City State Zip Code
Port Washington NY 11050-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR652052754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Laura A. Sheldon

Mailing Address 3 Cauldwell Street

City State Zip Code
Eastchester NY 10709-3603

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Applications Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR652062754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

333.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Nicholas E. Pasyanos

Mailing Address 58 Watergate Drive

City

Amawalk

State

NY

Zip Code

10501-1108

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR652112754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Puneet Seth

Mailing Address 2 Betsy Ross Court

City

East Brunswick

State

NJ

Zip Code

08816-3264

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654342754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John P. Curry

Mailing Address 905 Foxhollow Run

City

Alpharetta

State

GA

Zip Code

30004-0959

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior V.P. - South Central Agencies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654352754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

350.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brett A. Nanna

Mailing Address 12102 Golden Harvest Drive

City

Fort Wayne

State

IN

Zip Code

46845-8995

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654382754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel F. Clements

Mailing Address 600 Rosinccross Court

City

San Ramon

State

CA

Zip Code

94582-5079

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654392754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ashwani K. Rana

Mailing Address 637 Norante Court

City

Pleasanton

State

CA

Zip Code

94566-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.96

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654412754

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Weekly)

SUBTOTAL of Receipts This Page (optional)

201.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 311

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brian R. Lescinkas

Mailing Address 9737 E Mount Pleasant Drive

City

Tucson

State

AZ

Zip Code

85749-9357

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

300.12

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654482754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Angelo J. Scialabba

Mailing Address 47 Lake Shore Drive

City

Eastchester

State

NY

Zip Code

10709-5216

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

First Vice President

Aggregate Year-to-Date ▼

278.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654532754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Juan R. Job

Mailing Address 4571 S Abilene Circle

City

Aurora

State

CO

Zip Code

80015-1100

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Cvp - Cultural Markets Manager

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654572754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

173.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brooks Cowan

Mailing Address 60 Pineapple Street
8F

City State Zip Code
Brooklyn NY 11201-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Financial Systems Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654632754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kevin Curry

Mailing Address 75 Upland Road

City State Zip Code
New Milford CT 06776-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

817.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR654652754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Craig A. Lafferty

Mailing Address 26 Laurelwood Court

City State Zip Code
Medford NJ 08055-8364

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6572754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

317.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Anthony R. Malloy

Mailing Address 329 Beechwood Road

City

Ridgewood

State

NJ

Zip Code

07450-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Managing Director

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6582754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Sheila K. Davidson

Mailing Address 45 East Ninth Street
Apt. 6/7

City

New York

State

NY

Zip Code

10003-6307

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

E.V.P., Clo & General Counsel

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6592754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Wesley Morris

Mailing Address 789 Rock Springs Road

City

Kingsport

State

TN

Zip Code

37664-5265

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR659872754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

330.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Victoria C. Vilaret

Mailing Address 21 81st Avenue

City

Treasure Island

State

FL

Zip Code

33706-5212

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR660212754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jean-Louis M. Pedat

Mailing Address 148 West 70th Street
Apt. 8

City

New York

State

NY

Zip Code

10023-4412

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Internet Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR660222754

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John A. Cullen

Mailing Address 527 Parkview Avenue

City

Westfield

State

NJ

Zip Code

07090-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp Controller & Chief Accounting Off.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR660232754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 311

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Helen M. Napoli

Mailing Address 2 Oxford Road

City

North Caldwell

State

NJ

Zip Code

07006-4216

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR660252754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Nathan W. Fincher

Mailing Address 206 Casting Street Southeast

City

Albany

State

OR

Zip Code

97322-7347

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Development Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR660262754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Leonard J. Mackesy

Mailing Address 8 Hillside Avenue

City

Kearny

State

NJ

Zip Code

07032-1633

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR660272754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

380.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Allen A. Hensley

Mailing Address 594 Larium Lane

City

Crystal Lake

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Life Product Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR669992754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald O. McCombs

Mailing Address 1663 Baywood Drive

City

Concord

State

CA

Zip Code

94521-1252

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Sales Development Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670032754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Marci P. Landaas

Mailing Address 11932 Middlebury Drive

City

Tampa

State

FL

Zip Code

33626-2520

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670072754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

177.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Alexander A. Burbatsky

Mailing Address 9 Stepping Stone Crescent

City

Dix Hills

State

NY

Zip Code

11746-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670132754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald J. Terry

Mailing Address 55 Rustic Gate Lane

City

Dix Hills

State

NY

Zip Code

11746-6138

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670262754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Stephen A. Bloom

Mailing Address 40 Southall Lane

City

Red Bank

State

NJ

Zip Code

07701-5761

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President & Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6702754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

173.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dennis V. Westgard

Mailing Address 1819 Kent Street

City

Westbury

State

NY

Zip Code

11590-5305

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670292754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Daley

Mailing Address 11 High Point Road

City

Westport

State

CT

Zip Code

06880-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Systems Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670372754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Kathleen E. Scollan

Mailing Address 306 Longvue Terrace

City

Yonkers

State

NY

Zip Code

10710-2113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670562754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

173.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Peter Brigando

Mailing Address 64 Musiker Avenue

City

Randolph

State

NJ

Zip Code

07869-4610

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670592754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul M. Peyser

Mailing Address 10 Kemp Drive

City

Springfield

State

NJ

Zip Code

07081-2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670602754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Susan J. Mullen

Mailing Address 133 E Santa Barbara Road

City

Lindenhurst

State

NY

Zip Code

11757-6711

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Compliance & Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670672754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

160.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Linda M. Freundlich

Mailing Address 60 Baraud Road South

City

Scarsdale

State

NY

Zip Code

10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670712754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Susan A. Thrope

Mailing Address 56 Random Farms Drive

City

Chappaqua

State

NY

Zip Code

10514-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp & Deputy General Counsel & Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1115.52

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670732754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard P. Bowman

Mailing Address 16 Pelham Avenue

City

Nanuet

State

NY

Zip Code

10954-3435

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assoc. General Counsel & Asst. Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670742754

Amount of Each Receipt this Period

35.19

P/R Deduction (\$11.73 Weekly)

SUBTOTAL of Receipts This Page (optional)

310.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Frederick B. Van Blaricom

Mailing Address 15 Bank Street
119F

City State Zip Code
White Plains NY 10606

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President - Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR670902754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. George E. Silos

Mailing Address 385 Larch Avenue

City State Zip Code
Bogota NJ 07603-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6712754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark W. Talgo

Mailing Address 5 Stony Hill Road

City State Zip Code
West Harrison NY 10604-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR672132754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

173.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gregory F. Appel

Mailing Address 113 Park Road Extension

City

Goldens Brg

State

NY

Zip Code

10526-1144

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR672422754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Dennis M. Cleary

Mailing Address 9343 246th Street

City

Floral Park

State

NY

Zip Code

11001-3922

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR672432754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Theresa M. Pepe

Mailing Address 875 Route 312

City

Brewster

State

NY

Zip Code

10509-3726

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR672462754

Amount of Each Receipt this Period

44.94

P/R Deduction (\$14.98 Weekly)

SUBTOTAL of Receipts This Page (optional)

164.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Eric J. Grossman

Mailing Address 8310 35 Avenue
Apt. 40

City State Zip Code
Jackson Heights NY 11372-5317

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Assistant Vice President - Architectur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR672562754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Wee-
kly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kimberly Johnson

Mailing Address 200 Clinton Avenue Northwest
Suite 600

City State Zip Code
Huntsville AL 35801-4933

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR672572754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Wee-
kly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joseph J. Hogan

Mailing Address 8448 Eagle Preserve Way

City State Zip Code
Sarasota FL 34241-9449

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR672612754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Wee-
kly)

SUBTOTAL of Receipts This Page (optional)

190.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 / 311

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Steven J. Schoen

Mailing Address 84 Silver Spring Road

City

Short Hills

State

NJ

Zip Code

07078-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6752754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Margaret DeCesare

Mailing Address 9-5 Foxwood Drive

City

Pleasantville

State

NY

Zip Code

10570-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR686892754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Chandrakant A. Engineer

Mailing Address 65 Michael Lp

City

Staten Island

State

NY

Zip Code

10301-4638

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6892754

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

108.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John T. Baier

Mailing Address 12 Skytop Drive

City

Denville

State

NJ

Zip Code

07834-9542

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6922754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. C. G. Scull

Mailing Address 7395 Cool Road

City

Canfield

State

OH

Zip Code

44406-9490

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR6928402754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Izhak Asher

Mailing Address 29 Center Drive

City

Roslyn

State

NY

Zip Code

11576-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR694572754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

355.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 220 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Lloyd Pomerantz

Mailing Address 57 Marion Avenue

City

Merrick

State

NY

Zip Code

11566-3109

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR694592754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Harris Kagan

Mailing Address 1608 Pandora Avenue

City

Los Angeles

State

CA

Zip Code

90024-6114

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR694622754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steven Bumbara

Mailing Address 1617 Dumont Terrace

City

Wall

State

NJ

Zip Code

07719-3846

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR694702754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

126.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Leonard Isaacs

Mailing Address 66 Boulder Ridge Road

City

Scarsdale

State

NY

Zip Code

10583-3150

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR694712754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Tim F. Moore

Mailing Address 1539 Highbluff Drive

City

Diamond Bar

State

CA

Zip Code

91765-2631

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR694962754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Hammond Cobb

Mailing Address 8218 Longneedle Drive

City

Montgomery

State

AL

Zip Code

36117-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695082754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

171.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Charles N. Bombet li Cfp

Mailing Address 1370 Ashland Drive

City

Baton Rouge

State

LA

Zip Code

70806-7836

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695122754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Fitzpatrick

Mailing Address 103 Prospect Avenue

City

Waterloo

State

IA

Zip Code

50703-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695292754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gary Myers

Mailing Address 10825 Southwest 83 Terrace

City

Augusta

State

KS

Zip Code

67010-8025

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695432754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

246.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brandon R. Paulseen

Mailing Address 2816 North Tallgrass Street

City

Wichita

State

KS

Zip Code

67226-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695442754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brandon S. Handy

Mailing Address 2172 S 825 E

City

Clearfield

State

UT

Zip Code

84015-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695512754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Peter De La Rambelje

Mailing Address 3198 W Windwalker Place

City

Tucson

State

AZ

Zip Code

85742-5300

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695582754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

142.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Marc Bregman

Mailing Address 11701 E Kettleman Lane

City

Lodi

State

CA

Zip Code

95240-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695702754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Milo Abadilla

Mailing Address 3308 Moncucco Court

City

San Jose

State

CA

Zip Code

95148-4348

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR695832754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Leslie C. Griffin

Mailing Address 1301 N Courthouse Road
#906

City

Arlington

State

VA

Zip Code

22201-2535

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR696392754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

323.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Anna E. Dominguez

Mailing Address 3220 41st Street

City

Astoria

State

NY

Zip Code

11103-3522

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - Product Market Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.40

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR696532754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Marguerite E. Morrison

Mailing Address 20 West 86th Street
#6A

City

New York

State

NY

Zip Code

10024-3604

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR696602754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Victor A. Verastegui

Mailing Address 5404 Avenal Drive

City

Lutz

State

FL

Zip Code

33558-2823

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.64

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR696672754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

175.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Bik Y. Tsang

Mailing Address 1974 Troy Avenue

City

Brooklyn

State

NY

Zip Code

11234-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7002754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Julia Hsiao

Mailing Address 19701 Northampton Drive

City

Saratoga

State

CA

Zip Code

95070-3333

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR706752754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William F. Leisman, III

Mailing Address 4 Orchard Avenue

City

Weston

State

MA

Zip Code

02193-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR706802754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

280.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joel Steele

Mailing Address 22 Belmont Circle

City

Columbus

State

NJ

Zip Code

08022-9714

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707002754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John A. Christopher

Mailing Address 8251 Pembridge

City

Woodridge

State

IL

Zip Code

60517-7733

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707082754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. P. J. Demarie, III

Mailing Address 24 Woodvine Court

City

Covington

State

LA

Zip Code

70433-4724

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707092754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey C. Williams

Mailing Address 317 Sharondale

City

El Paso

State

TX

Zip Code

79912-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707112754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Glenn Jagodzinske

Mailing Address 6623 Southwest Gisbourne Court

City

Topeka

State

KS

Zip Code

66614-4455

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707132754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joe K. Lau

Mailing Address 11278 Del Golfo

City

Yuma

State

AZ

Zip Code

85367-8959

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707162754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Dixon

Mailing Address 5055 Pathfinder

City

Oak Park

State

CA

Zip Code

91377-4704

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707182754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Don Wilson

Mailing Address PO Box 91372

City

Anchorage

State

AK

Zip Code

99509-1372

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707202754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory W. Holmgren

Mailing Address 3340 Wolf Willow Close

City

Milton

State

GA

Zip Code

30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Zone Life Sales Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707282754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

332.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Elaine A. Rogers

Mailing Address 150 Melrose Avenue

City

Massapequa

State

NY

Zip Code

11758-5519

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR707292754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Grant H. Davis

Mailing Address 165 Mopus Bridge Road

City

Ridgefield

State

CT

Zip Code

06877-1211

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7102754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Lee Kitzenberg

Mailing Address 5814 Vernon Lane

City

Edina

State

MN

Zip Code

55436-2250

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR712602754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

173.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ronald F. Walker

Mailing Address 1575 Fairway Drive

City

Los Altos

State

CA

Zip Code

94024-5342

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR712622754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bob Homler

Mailing Address 209 Orchard Drive

City

Mahwah

State

NJ

Zip Code

07430-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7142754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bill Van Winkle

Mailing Address 41 Breezy Point

City

Little Silver

State

NJ

Zip Code

07739-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7172754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

292.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael Gisonda

Mailing Address 2402 Northwest 36th Street

City

Boca Raton

State

FL

Zip Code

33431-5415

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR717542754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael Shock

Mailing Address 21 Rebecca Lane

City

Conway

State

AR

Zip Code

72032-4961

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR717612754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Heedo Han

Mailing Address 29241 Las Brisas Road

City

Valencia

State

CA

Zip Code

91354-1542

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR717662754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dan L. Ting

Mailing Address C/O Nylife International

51 Madison Avenue, Room 1016

City

New York

State

NY

Zip Code

10010-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Country Head - Taiwan

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR717912754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. George R. Shadie

Mailing Address 57 Teaberry Drive

Sand Springs

City

Drums

State

PA

Zip Code

18222-2051

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7242754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Stoll

Mailing Address 16 Kingston Circle

City

Lockport

State

NY

Zip Code

14094-5606

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR725192754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

274.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Francis M. Evans

Mailing Address 1222 W 41st Street

City

La Grange

State

IL

Zip Code

60525-5802

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR725282754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Raouf Salib

Mailing Address 1221 Millcreek Drive

City

Flint

State

MI

Zip Code

48532-2348

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR725292754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joeseeph W. Lucchino

Mailing Address 1100 Cambridge Street

City

Natrona Heights

State

PA

Zip Code

15065-1010

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7272754

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

248.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Christopher O. Blunt

Mailing Address 9 Yarmouth Road

City

Rowayton

State

CT

Zip Code

06853-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp & C.O.O. for Life & Annuity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR729572754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott L. Lenz

Mailing Address 41 Bellevue Avenue

City

Summit

State

NJ

Zip Code

07901-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First V.P. & Associate Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR729592754

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John M. Hayes

Mailing Address 7 Sun Valley Way

City

Long Valley

State

NJ

Zip Code

07853-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR729602754

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

410.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Stuart L. Ashton

Mailing Address 173 Washington Valley Road

City

Morristown

State

NJ

Zip Code

07960-3340

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.11

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734482754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Donna S. Betz

Mailing Address 1407 73rd Circle Northeast

City

St. Petersburg

State

FL

Zip Code

33702-4615

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Marketing Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734512754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Toomey

Mailing Address 4012 Ligustrum Drive

City

Palm Harbor

State

FL

Zip Code

34685-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734532754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

205.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Edward J. Fitzgerald

Mailing Address 121 Stratford Road

City

West Hempstead

State

NY

Zip Code

11552-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734552754

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Randy K. Cox

Mailing Address 541 Oak Grove Road

City

Chesapeake

State

VA

Zip Code

23320-3723

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734622754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Fredric V. Collins

Mailing Address 1713 Monk Place

City

Mount Pleasant

State

SC

Zip Code

29466-7016

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734632754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

408.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. C. Mack Deas, Jr.

Mailing Address 1069 Inverness Cove Way

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734642754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott G. Ayers

Mailing Address 40 Tabor Place

City

South Burlington

State

VT

Zip Code

05403-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734652754

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory T. Yepez

Mailing Address 6 Calle Vallecitos

City

Tijeras

State

NM

Zip Code

87059-7870

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734672754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

438.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott L. Berlin

Mailing Address 22 Jerome Road

City

Syosset

State

NY

Zip Code

11791-3207

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.22

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734712754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott E. Stone

Mailing Address 3445 Stratford Road
3203

City

Atlanta

State

GA

Zip Code

30326-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734752754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Gayl Thomas

Mailing Address 3044 Ten Mile Drive

City

Sparks

State

NV

Zip Code

89436-7027

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734812754

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

425.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas S. Heller

Mailing Address 230 Mahwah Road

City

Mahwah

State

NJ

Zip Code

07430-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734862754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul J. Appel

Mailing Address 2019 Hemlock Farms
110 Wagoner Lane

City

Hawley

State

PA

Zip Code

18428-9073

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734872754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Irwin Silber

Mailing Address 104 McNamara Road

City

Spring Valley

State

NY

Zip Code

10977-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR734942754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

175.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard M. Walsh

Mailing Address 32 Hilltop Road

City

Waccabuc

State

NY

Zip Code

10597-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735032754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Lindsay J. Malkiewich

Mailing Address 7 Bent Birch Place

City

Parsippany

State

NJ

Zip Code

07054-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735042754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bryan L. Karant

Mailing Address 106 Beech Street

City

Cranford

State

NJ

Zip Code

07016-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Systems Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.02

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735082754

Amount of Each Receipt this Period

46.17

P/R Deduction (\$15.39 Weekly)

SUBTOTAL of Receipts This Page (optional)

196.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 242 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark J. Draghi

Mailing Address 12 Nancy Terrace

City

Hackettstown

State

NJ

Zip Code

07840-5633

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735112754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. John B. Langdon

Mailing Address 4109 Michael Neill Drive

City

Austin

State

TX

Zip Code

78730-1432

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Sales and Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735182754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. James M. Vaeth

Mailing Address 2087 Natalie Boulevard

City

Seaford

State

NY

Zip Code

11783-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735212754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

190.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 243 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Binh Q. Nguyen

Mailing Address 572 Misty Mountain Lane

City

Roanoke

State

VA

Zip Code

24012

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735232754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas A. Clough

Mailing Address 172 Summer Avenue

City

Reading

State

MA

Zip Code

01867-2824

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735252754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. David F. Wright

Mailing Address 50 Arcadia Road

City

Allendale

State

NJ

Zip Code

07401-2002

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR735292754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

160.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Harold J. Beers

Mailing Address 1206 State Route 428

City

State

Zip Code

Oil City

PA

16301-4932

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7362754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John F. Horwitz

Mailing Address 168 Upland Road

City

State

Zip Code

Sharon

MA

02067-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Sales Development Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR741582754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Mildred R. Nece

Mailing Address 121 Pacific Street
Apt. A-4E

City

State

Zip Code

Brooklyn

NY

11201-5555

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR741612754

Amount of Each Receipt this Period

36.00

P/R Deduction (\$12.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

141.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Jamilyn M. Durbin-Bailey

Mailing Address 4722 Portobello Circle

City

Valrico

State

FL

Zip Code

33596-7370

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - Field Marketing Strategy Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR741692754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. John C. Jackson

Mailing Address 1603 Johnny Miller T

City

Austin

State

TX

Zip Code

78746-6125

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Sales Development Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR741762754

Amount of Each Receipt this Period

36.00

P/R Deduction (\$12.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas G. Young

Mailing Address 10300 Salida Drive

City

Austin

State

TX

Zip Code

78749-6918

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President - Sales Suppo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR741862754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

156.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Peter J. McAvinn

Mailing Address 49 Fiske Road

City

Wellesley

State

MA

Zip Code

02481-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR742754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark F. Nestleroth

Mailing Address 1741 Airy Hill Road

City

Manheim

State

PA

Zip Code

17545-8531

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7432754

Amount of Each Receipt this Period

34.67

P/R Deduction (\$34.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Pagano

Mailing Address 390 Forest Avenue

City

Glen Ridge

State

NJ

Zip Code

07028-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745042754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

323.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark B. Magnus

Mailing Address 10 Abbey Lane

City

Rehoboth

State

MA

Zip Code

02769-2230

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Consulting Actuary

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745132754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Sam Mancino

Mailing Address 106 Four Winds Drive

City

Middletown

State

NJ

Zip Code

07748-3143

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Director

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745162754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Monique A. McClure

Mailing Address 346 11th Street
#4

City

Brooklyn

State

NY

Zip Code

11215-4039

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745222754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

175.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Larry K. Oxenberg

Mailing Address 135 Andrea Road

City

Cheltenham

State

PA

Zip Code

19012-1311

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7452754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen P. Fisher

Mailing Address 601 Fairmont Avenue

City

Westfield

State

NJ

Zip Code

07090-1360

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745282754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. David C. Herrick

Mailing Address 14515 Southern Pines

City

Dallas

State

TX

Zip Code

75234

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Case Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745322754

Amount of Each Receipt this Period

36.00

P/R Deduction (\$12.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

119.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William T. Feakes

Mailing Address 9445 Nicklaus Lane

City

Crystal Lake

State

IL

Zip Code

60014-3340

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Annuity Product Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745422754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. John C. Austin

Mailing Address 13104 Glenfield Road

City

Leawood

State

KS

Zip Code

66209-1798

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR745432754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bruce Cumby

Mailing Address 816 Ellis Avenue

City

Newtown Sq

State

PA

Zip Code

19073-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7472754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

161.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John M. Angiulli

Mailing Address 1059 Old Orchard Drive

City

Gibsonia

State

PA

Zip Code

15044-6081

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7482754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Barbara N. Filippelli

Mailing Address 5170 Dove Point Lane

City

Salisbury

State

MD

Zip Code

21801-1273

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7492754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Longenhagen, Sr., Sr.

Mailing Address 1201 7th Street

City

Catasauqua

State

PA

Zip Code

18032-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7592754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

176.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Nguyen B. Mai

Mailing Address 600 Trapelo Road
Apt. 15

City State Zip Code
Waltham MA 02452-7996

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR762754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Tema L. Steele

Mailing Address 104 Van Buren Road

City State Zip Code
Voorhees NJ 08043-2354

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7642754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael T. Piotrowicz

Mailing Address 504 Anthony Drive

City State Zip Code
Plymouth Mtng PA 19462-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.28

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7772754

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional)

641.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Edward W. Colello

Mailing Address 42 Scenic Ridge Drive

City

Brewster

State

NY

Zip Code

10509-4303

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR782754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Amato Berardi

Mailing Address 52 Pineview Drive

City

Huntingdon Valley

State

PA

Zip Code

19006-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7852754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey A. Morrison

Mailing Address 1451 Radbill Circle

City

Berwyn

State

PA

Zip Code

19312-2502

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7962754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

248.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 253 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Auteri

Mailing Address 2515 Garrett Road

City

Drexel Hill

State

PA

Zip Code

19026-1010

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR7972754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John Rocco Clu Msfs

Mailing Address 16 Midland Road

City

Lynnfield

State

MA

Zip Code

01940-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR802754

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Charles R. Eckardt

Mailing Address 620 Meetinghouse Road

City

Rydal

State

PA

Zip Code

19046-2935

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8092754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

333.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Terrence L. Wolf

Mailing Address 119 Great Circle Road

City

Landenberg

State

PA

Zip Code

19350-9110

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8172754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gilbert A. Ridgely

Mailing Address 314 Mannering Drive

City

Dover

State

DE

Zip Code

19901-5407

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8192754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mariano C. Fontanilla

Mailing Address 86-15 Elmhurst Avenue
Apt. 6L

City

Elmhurst

State

NY

Zip Code

11372-2596

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8292754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

168.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Gail L. Hoffman

Mailing Address 6419 Clearview Street

City

Philadelphia

State

PA

Zip Code

19119-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8362754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Jones

Mailing Address 1261 Lakevue Drive

City

Butler

State

PA

Zip Code

16002-7625

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8382754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Mary A. McGinley

Mailing Address 98 Hillcrest Lane

City

Peekskill

State

NY

Zip Code

10566-6925

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
A.V.P. - Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR842112754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

136.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert P. Ducato Clu Chfc

Mailing Address 10 Franklin Street

City

Westfield

State

NY

Zip Code

14787-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8432754

Amount of Each Receipt this Period

33.00

P/R Deduction (\$41.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Ms. Cynthia J. Guldry

Mailing Address 2026 Yonkee Drive

City

Windsor

State

CO

Zip Code

80550-4685

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849072754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bernard Zaleski

Mailing Address 9461 Cross Creek Court

City

Wichita

State

KS

Zip Code

67206-4066

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849182754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

166.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David A. Herlicka

Mailing Address 49 Technology Drive #62

City

Bedford

State

NH

Zip Code

03110-6970

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849232754

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Frank J. Feola

Mailing Address 6039 Walden Court

City

Mentor

State

OH

Zip Code

44060-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849262754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael S. Anderson

Mailing Address 29002 W Acanthus Court

City

Agoura

State

CA

Zip Code

91301-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849272754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Irving A. Rose

Mailing Address 3 Tree Hollow Lane

City

Dix Hills

State

NY

Zip Code

11746-6315

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849622754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Sylvia M. Forster

Mailing Address 29129 N 20th Avenue

City

Phoenix

State

AZ

Zip Code

85085

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849742754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Matthew E. Vahl

Mailing Address 1419 Pine Cove Court

City

Darien

State

IL

Zip Code

60561-4999

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
A.V.P. - Regional Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR849762754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

201.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jenkins Mikell, III

Mailing Address 8 Lord Nelson Court

City

Columbia

State

SC

Zip Code

29209-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853182754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David L. Johnson

Mailing Address 27694 Highway 30

City

Glidden

State

IA

Zip Code

51443-8807

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853192754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Yvonne Russell

Mailing Address 435 East 86st #4-F

City

New York

State

NY

Zip Code

10028-6446

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853212754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David L. Towry, Sr., Sr.

Mailing Address 574 Harbortown Court

City

Salem

State

OR

Zip Code

97306-9355

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853222754

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John T. Richards

Mailing Address 5801 Papaya Place Northeast

City

Albuquerque

State

NM

Zip Code

87111-6223

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853262754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Brian Winter

Mailing Address 1513 Oxford Road

City

Wantagh

State

NY

Zip Code

11793-2445

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853272754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

308.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David Lynch

Mailing Address 3901 Custis Road

City

Richmond

State

VA

Zip Code

23225-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853292754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Ms. Lydia Patricio

Mailing Address 2627 Alemany Boulevard

City

San Francisco

State

CA

Zip Code

94112-4101

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853302754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Romeo Lazzarone

Mailing Address 2080 Brittany Meadows Drive

City

Reno

State

NV

Zip Code

89521-5271

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853402754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Rupa Mehta

Mailing Address 5423 Twin Creeks Drive

City

Valrico

State

FL

Zip Code

33594-8283

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853412754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael P. Lackey

Mailing Address 25 Zaitz Farm Road

City

Princeton Junction

State

NJ

Zip Code

08850

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853502754

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Paul T. Pasteris

Mailing Address 534 Farm Road

City

Fayston

State

VT

Zip Code

05673-7258

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1106.52

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR853512754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

348.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joel M. Steinberg

Mailing Address 44 Spruce Street

City

Princeton Junction

State

NJ

Zip Code

08550-2019

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp - Fmd & L&a Chief Financial Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1269.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8552754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Neil Bryson

Mailing Address 5613 Lionel Drive

City

Fort Wayne

State

IN

Zip Code

46815-5235

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR85662754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Shauna L. Soper

Mailing Address 11855 Villa Creek Avenue

City

Baton Rouge

State

LA

Zip Code

70810-7341

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR856672754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

332.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 / 311

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Ziegler

Mailing Address 11 Windham Loop
Apt. 4Ee

City State Zip Code
Staten Island NY 10314-5937

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR860972754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. William Mattox

Mailing Address 3742 N Tazewell Street

City State Zip Code
Arlington VA 22207-4572

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR860982754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. David Walsh

Mailing Address 150 Vista Grande

City State Zip Code
Greenbrae CA 94904-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR862754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

455.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas F. English

Mailing Address 27 Hedge Brook Lane

City

Stamford

State

CT

Zip Code

06903-2029

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Svp & Chief Insurance Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8632754

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott F. Della Penna

Mailing Address 9541 Purcell Drive

City

Potomac

State

MD

Zip Code

20854-4500

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8672754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John J. O'Gara

Mailing Address 8 Rock Ridge Court

City

New Fairfield

State

CT

Zip Code

06812-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR870912754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

380.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas S. McArdle

Mailing Address 10 Boyd Road

City

Hazlet

State

NJ

Zip Code

07730-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR871012754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Adam G. Clemens

Mailing Address 161 E 79th Street
Apt. 8B

City

New York

State

NY

Zip Code

10075-0480

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR871082754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael G. Dubrow

Mailing Address 181 East 90th Street
Apt. 8C

City

New York

State

NY

Zip Code

10128-2389

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR871092754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

230.85

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Wayne J. Francingues, Jr.

Mailing Address 2408 Fagot Street

City

Metairie

State

LA

Zip Code

70001-4209

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR871322754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kenneth J. Hittel

Mailing Address 250 W 90th Street
Apt. 10H

City

New York

State

NY

Zip Code

10024-1142

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8722754

Amount of Each Receipt this Period

84.00

P/R Deduction (\$28.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank R. Jones

Mailing Address 500 Virginia Street East
Suite 1100

City

Charleston

State

WV

Zip Code

25301-2151

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875452754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

183.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bradley K. Wright

Mailing Address 5528 Ash Grove Circle

City

Montgomery

State

AL

Zip Code

36116-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875482754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher D. Lundquist

Mailing Address 477 North Palisade Drive

City

Orem

State

UT

Zip Code

84097

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875492754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark S. Niziak

Mailing Address 7 Cutler Street

City

Hopedale

State

MA

Zip Code

01747-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875582754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

175.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Alison H. Micucci

Mailing Address 16 Munsey Road

City

Emerson

State

NJ

Zip Code

07630-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875592754

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jonathan G. Sailer

Mailing Address 12 Cherry Lane

City

Port Jeff Station

State

NY

Zip Code

11776-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875622754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Helen J. Stagias

Mailing Address 3079 48th Street

City

Astoria

State

NY

Zip Code

11103-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - Governmental Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875732754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

175.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tony H. Elavia

Mailing Address 12 Windsor Court

City

State

Zip Code

Purchase

NY

10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875822754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Walter A. Lauzau

Mailing Address 357 Rambling Road

City

State

Zip Code

East Amherst

NY

14051-1371

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Development Manager li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR875902754

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Roy Stachnik

Mailing Address 326 Main Street Suite 230

City

State

Zip Code

Grand Junction

CO

81501-2476

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR880602754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

455.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jason Apolenis

Mailing Address 12810 Navigators Lane

City

Gaithersburg

State

MD

Zip Code

20878-6115

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR880632754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard C. Schwartz

Mailing Address 744 High Woods Drive

City

Franklin Lakes

State

NJ

Zip Code

07417-2272

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR880652754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. B. Christopher Stokes

Mailing Address 3657 Patuxent River Road

City

Davidsonville

State

MD

Zip Code

21035-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8832754

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

522.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Milton A. Dugger, Jr.

Mailing Address 904 Dartmouth Road

City

Baltimore

State

MD

Zip Code

21212-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8842754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Robin M. Wahby

Mailing Address 385 Royal Tern Rd. S

City

Ponte Vedra

State

FL

Zip Code

32082-6209

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8882754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Xavier Decaire

Mailing Address 8 Pacer Court

City

Newark

State

DE

Zip Code

19711-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8902754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

322.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dustin Aiguier

Mailing Address 408 Winslow Gray Road

City

West Yarmouth

State

MA

Zip Code

02673-3826

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR890722754

Amount of Each Receipt this Period

32.00

P/R Deduction (\$32.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Karen Stawicki

Mailing Address 14976 Venado Drive

City

Rancho Murieta

State

CA

Zip Code

95683-9323

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR892754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Arphiela Arizmendi

Mailing Address 12 Prince Henry Drive

City

Randolph

State

NJ

Zip Code

07869-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR893872754

Amount of Each Receipt this Period

87.00

P/R Deduction (\$29.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

285.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Deborah L. Mumford

Mailing Address 845 Summerset Drive

City

Hockessin

State

DE

Zip Code

19707-9336

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR8952754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher Battersby

Mailing Address 51 Mitchell Road

City

Holliston

State

MA

Zip Code

01746-2469

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR897662754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Toby Bishop

Mailing Address 117 50th Avenue E

City

West Fargo

State

ND

Zip Code

58078-8247

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR900652754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

306.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Simon Bloomfield

Mailing Address 2091 Main Street

City

Brewster

State

MA

Zip Code

02631-1819

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR901522754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Andrew Bondar

Mailing Address 3693 Halter Court

City

Sacramento

State

CA

Zip Code

95821-3267

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR902192754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rob Ostberg

Mailing Address 48 Greenleaf Drive

City

Northampton

State

MA

Zip Code

01060-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR902754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Steven M. Brinton

Mailing Address 3000 Connor
#33

City State Zip Code
Salt Lake City UT 84109-2450

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.68

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR904702754

Amount of Each Receipt this Period

20.84

P/R Deduction (\$20.84 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bill Weimer

Mailing Address 7234 Hanover Grove Lane

City State Zip Code
Mechanicstvl VA 23111-5633

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9062754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Chad Burtrum

Mailing Address 10267 Wake Robin Trail

City State Zip Code
Grand Blanc MI 48439-9354

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR907392754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

229.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Campellone

Mailing Address 61 Reed Dr. S

City

Princeton Junction

State

NJ

Zip Code

08550-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR908922754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Dan Carson

Mailing Address 689 Forrest Haven Court

City

Greenville

State

SC

Zip Code

29609-6522

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR910312754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Timothy C. Carter

Mailing Address 4945 Stonehaven Drive

City

Yorba Linda

State

CA

Zip Code

92887-2635

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR910532754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

158.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Derek Chu

Mailing Address 405 Camelback Road

City

Pleasant Hill

State

CA

Zip Code

94523-1370

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR914412754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Felix S. Chu

Mailing Address 11 Mercury Court

City

Pleasant Hill

State

CA

Zip Code

94523-2167

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR914422754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Rose A. Gentile

Mailing Address 606 South Payne Street

City

Alexandria

State

VA

Zip Code

22314-3928

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9172754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Clint G. Cornette

Mailing Address 1505 Country Club Road

City

Wilmington

State

NC

Zip Code

28403-4818

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR917972754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gordon E. Parker, Jr.

Mailing Address 422 Discovery Road

City

Virginia Beach

State

VA

Zip Code

23451-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9182754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. David K. Cote

Mailing Address 20 Driscoll Road

City

Selah

State

WA

Zip Code

98942-9316

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR918292754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael T. Damon

Mailing Address 9 Little Tree Road

City

Medway

State

MA

Zip Code

02053-6131

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR921142754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott K. McGuire

Mailing Address 1983 Woodlake Drive

City

Benton

State

LA

Zip Code

71006-9305

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9212754

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Asa M. Davis

Mailing Address 6026 Salem Lane

City

Portage

State

MI

Zip Code

49002-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR921882754

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

193.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Laura M. Day

Mailing Address 121 St. Regis Drive

City

Newark

State

DE

Zip Code

19711-3822

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR922332754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kevin Doyle

Mailing Address 589 Atwells Avenue
Unit 3H

City

Providence

State

RI

Zip Code

02909-7402

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR926872754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Douglas B. Dubitsky

Mailing Address 259 Carlton Terrace

City

Teaneck

State

NJ

Zip Code

07666-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.84

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR927252754

Amount of Each Receipt this Period

19.24

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

102.58

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Walker R. Ellis, Jr.

Mailing Address 650 Northwest 48th Avenue

City

Coconut Creek

State

FL

Zip Code

33063-4637

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR929492754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. A. David Erland

Mailing Address 23813 Northeast 27th Street

City

Sammamish

State

WA

Zip Code

98074-5485

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1077.06

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR930192754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rick Jennell

Mailing Address 302 Chestnut Street
PO Box 335

City

Pearisburg

State

VA

Zip Code

24134-0335

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9302754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

298.46

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 / 311

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Terry G. Fenwick

Mailing Address 2309 Stannye Drive

City

Louisville

State

KY

Zip Code

40222-6351

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR932182754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Theodore A. Mathas

Mailing Address 14 Cole Drive

City

Armonk

State

NY

Zip Code

10504-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
President & Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR9322754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Wee-
kly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Stephen C. Fiacco

Mailing Address 122 Bower Lane

City

Forest Hill

State

MD

Zip Code

21050-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	8

Transaction ID: PR932782754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Wee-
kly)

SUBTOTAL of Receipts This Page (optional)

330.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 284 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Cindi R. Fox

Mailing Address 1114 Sunset Drive

City

Kimberly

State

WI

Zip Code

54136-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR934872754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ryan Frame

Mailing Address 1708 Shetland Drive

City

Spring Hill

State

TN

Zip Code

37174-9525

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR934972754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Jane L. Hamrick

Mailing Address 531 East 88th
3C

City

New York

State

NY

Zip Code

10128-7737

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9352754

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

347.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jim Franson

Mailing Address 36135 Eagle Court

City

Ingleside

State

IL

Zip Code

60041-9551

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR935312754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Zacharias Fthenakis

Mailing Address 99 Whistler Road

City

Manhasset

State

NY

Zip Code

11030-2839

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR936132754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Gaillard

Mailing Address 7517 Grenade Court

City

Crp Christi

State

TX

Zip Code

78414-6291

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR936632754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

141.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Roxane Kronon Galati

Mailing Address 525 Turtle Hatch Road

City

Naples

State

FL

Zip Code

34103-8540

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR936682754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. James A. Gallacher

Mailing Address 1691 Blanc Lane

City

Cantonment

State

FL

Zip Code

32533-9263

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR936782754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joshua Q. Gardner

Mailing Address 2533 Silver Spur Trail

City

Billings

State

MT

Zip Code

59105-3764

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR937552754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

SUBTOTAL of Receipts This Page (optional)

439.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. F. C. Hoge

Mailing Address 3027 Golf Colony Drive

City

Salem

State

VA

Zip Code

24153-6833

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9382754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Charles F. Rowell, Jr.

Mailing Address 114 Severn Drive

City

Seven Fields

State

PA

Zip Code

16046

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9402754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry Prentice

Mailing Address 6003 Wilmington Drive

City

Burke

State

VA

Zip Code

22015-3823

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9422754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

355.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Haden, Jr.

Mailing Address 4515 Ridgecrest Lane

City

Colonial Heights

State

VA

Zip Code

23834-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR944312754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Mary Lou Hamill

Mailing Address 183 Biltmore Drive

City

Barrington

State

IL

Zip Code

60010-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR945262754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard A. Hoberman

Mailing Address 14 Wake Robin Road

City

Westport

State

CT

Zip Code

06880-6203

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR950712754

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Weekly)

SUBTOTAL of Receipts This Page (optional)

112.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Stanley Hunter

Mailing Address 411 Theodore Fremd Avenue

City

Rye

State

NY

Zip Code

10580-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR953732754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Justin M. Iverson

Mailing Address 14675 Southwest Sage Drive

City

Powell Butte

State

OR

Zip Code

97753-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR955022754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Janet Nichols

Mailing Address 1323 Mount Carmel Ridge Road

City

St. Marys

State

WV

Zip Code

26170-4661

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9572754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

117.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 290 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bruce P. Kardon

Mailing Address 4773 Parkside Drive

City

Frisco

State

TX

Zip Code

75034-8100

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Cvp - Advanced Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR960362754

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. David F. Keefe

Mailing Address 116 Mill Street

City

Newton Center

State

MA

Zip Code

02459-1127

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR961142754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Noel I. Kellert

Mailing Address 13201 Squires Court

City

North Potomac

State

MD

Zip Code

20878-3987

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR961392754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

145.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard G. Kelly

Mailing Address 32 Marlboro Street

City

Norwood

State

MA

Zip Code

02453-1212

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR961562754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert L. Pethal

Mailing Address 4507 Hazeltine Court
Apt. E

City

Alexandria

State

VA

Zip Code

22312-3205

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9622754

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gerald F. Hall

Mailing Address 15 Fieldstone Drive

City

Westport

State

MA

Zip Code

02790-2634

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR962754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

151.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James Adkins, Jr.

Mailing Address 10200 Wendover Drive

City

Vienna

State

VA

Zip Code

22181-2960

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9652754

Amount of Each Receipt this Period

375.00

P/R Deduction (\$375.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Michelle M. Ksidakis

Mailing Address 1665 Stone Canyon Drive

City

Roseville

State

CA

Zip Code

95661-4041

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR965772754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Karen J. Lamp

Mailing Address 201 E 21st Street
Apt. 20J

City

New York

State

NY

Zip Code

10010-6426

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
V.P. & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR967052754

Amount of Each Receipt this Period

57.72

P/R Deduction (\$19.24 Weekly)

SUBTOTAL of Receipts This Page (optional)

474.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 293 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph Lane

Mailing Address 703 North Kansas

City

Deland

State

FL

Zip Code

32724-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR967292754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jason Leonard

Mailing Address 84 Minton Lane

City

West Barnstable

State

MA

Zip Code

02668-1817

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.74

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR970482754

Amount of Each Receipt this Period

230.79

P/R Deduction (\$76.93 Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Louise M. Linck

Mailing Address 1605 Beech Street

City

Wantagh

State

NY

Zip Code

11793-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Cvp - Treasury Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR972262754

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

375.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dan Kunhardt

Mailing Address 11 Madison Circle

City

Greenfield

State

MA

Zip Code

01301-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR972754

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. James Lutz

Mailing Address 4539 Whitney Drive

City

Noblesville

State

IN

Zip Code

46062

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Development Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR975022754

Amount of Each Receipt this Period

62.52

P/R Deduction (\$20.84 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rowan G. MacDonald

Mailing Address 165 E 32nd Street
4H

City

New York

State

NY

Zip Code

10016-6010

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President & Deputy Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.85

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR975422754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

SUBTOTAL of Receipts This Page (optional)

302.93

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brian G. Madgett

Mailing Address 188 Dove Creek Lane

City

Danville

State

CA

Zip Code

94506

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - Zone Life Sales Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.94

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR975722754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher Matheson

Mailing Address 2601 S Baldwin Avenue

City

Arcadia

State

CA

Zip Code

91007-8356

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.70

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR979332754

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jason Matthews

Mailing Address 4021 Rockford Drive

City

Antioch

State

CA

Zip Code

94509-6919

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR979592754

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

397.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Akiva Miller

Mailing Address 1626 49th Street

City

Brooklyn

State

NY

Zip Code

11204-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR985242754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary Miller

Mailing Address 1211 E Nicolet Avenue

City

Phoenix

State

AZ

Zip Code

85020-5118

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR985412754

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jay P. Miller

Mailing Address 5407 Landon Circle

City

Boynton Beach

State

FL

Zip Code

33437-1677

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR985522754

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

175.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. C. Stuart Nelson

Mailing Address 2424 Honeysuckle Road

City

Chapel Hill

State

NC

Zip Code

27514-6820

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9872754

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Rick L. Ness

Mailing Address 9642 S 161 Street

City

Omaha

State

NE

Zip Code

68136-1468

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR992172754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. James Bergeron

Mailing Address 905 Bosley Road

City

Cockeysville

State

MD

Zip Code

21030-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR9922754

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

176.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 / 311

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David Oestreicher

Mailing Address 10 Timberlane Drive

City

Williamsville

State

NY

Zip Code

14221-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR995022754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas H. Pace

Mailing Address 6510 Daisy

City

Arlington

State

TX

Zip Code

76017-4970

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR996842754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Ms. Karen M. Palmer

Mailing Address 645 Kindig Road

City

Littlestown

State

PA

Zip Code

17340-9169

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: PR997392754

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

125.01

TOTAL This Period (last page this line number only)

80437.38

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Paul Hodes For Congress

Mailing Address 26 South Main Street, #253

City State Zip Code
Concord NH 03301

Purpose of Disbursement
Contribution

Candidate Name
Paul Hodes

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 02

Transaction ID: 4590590

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Tim Murphy For Congress

Mailing Address PO Box 24551

City State Zip Code
Pittsburgh PA 15234

Purpose of Disbursement
Contribution

Candidate Name
Tim Murphy

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 18

Transaction ID: 4590592

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

3000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Marsha Blackburn For Congress Inc.

Mailing Address PO Box 682185

City State Zip Code
Franklin TN 37068

Purpose of Disbursement
Contribution

Candidate Name
Marsha Blackburn

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 07

Transaction ID: 4590936

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

2500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 300 / 311

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gillibrand For Congress

Mailing Address P.O. Box 15734

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
ContributionCandidate Name
Kirsten Gillibrand

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 20

Transaction ID: 4590938

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	8

Amount of Each Disbursement this Period

1500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Maine Republican Party - Federal Account

Mailing Address 76 Silver Street

City
WatervilleState
MEZip Code
04901Purpose of Disbursement
ContributionCandidate Name
Maine Republican Party - Federal Account

011

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 4590943

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	8

Amount of Each Disbursement this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Kerry for Senate

Mailing Address 10 G Street Ne
Suite 710City
WashingtonState
DCZip Code
20002Purpose of Disbursement
ContributionCandidate Name
John Kerry

011

Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District:

Transaction ID: 4591013

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	8

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John Kerry for Senate

Mailing Address 10 G Street Ne
Suite 710

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name
John Kerry

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: MA District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 4591014

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

3000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Pennsylvanians For Kanjorski

Mailing Address 103 South Hanover Street

City Nanticoke State PA Zip Code 18634

Purpose of Disbursement
Contribution

Candidate Name
Paul E. Kanjorski

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 11

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 4591601

Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Stephanie Tubbs Jones For US Congress

Mailing Address 3729 Silsby Rd

City University Heights State OH Zip Code 44118

Purpose of Disbursement
Contribution

Candidate Name
Stephanie Tubbs Jones

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: OH District: 11

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 4614523

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Cathy McMorris For Congress

Mailing Address Box 137

City
Spokane

State
WA

Zip Code
99210

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Cathy McMorris Rodgers

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 05

Transaction ID: 4614524

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

2000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Salazar For Senate

Mailing Address PO Box 600

City
Denver

State
CO

Zip Code
80201

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Ken Salazar

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District:

Transaction ID: 4614561

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

2000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Freedom Fund

Mailing Address 1155 21st Street Northwest
Suite 300

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Freedom Fund

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 4614562

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

2500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Culberson For Congress

Mailing Address P.O. Box 41964

City
Houston

State
TX

Zip Code
77241

Purpose of Disbursement
Contribution

Candidate Name
John Culberson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 07

Transaction ID: 4614564

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Wally Herger for Congress Committee

Mailing Address P.O. Box 1500

City
Chico

State
CA

Zip Code
95927

Purpose of Disbursement
Contribution

Candidate Name
Wally Herger

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 02

Transaction ID: 4614565

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

2000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Searchlight Leadership Fund

Mailing Address 607 14H Street Northwest
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Contribution

Candidate Name
Searchlight Leadership Fund

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 4614566

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Committee for Hispanic Causes/Building Our Leadership's
Diversity PAC (CHC BOLD PAC)

Mailing Address 1831 Bay Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name
Committee for Hispanic Causes/Building Our Leaders-
hip's Diversity PAC (CHC BOLD PAC)

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 4614567

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Becerra For Congress

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement
Contribution

Candidate Name
Xavier Becerra

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 31

Transaction ID: 4614575

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Leadership of Today and Tomorrow

Mailing Address 607 14th Street NW
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name
Leadership of Today and Tomorrow

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 4614581

Date of Disbursement

08 / 14 / 2008

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ben Chandler For Congress

Mailing Address P. O. Box 12678

City
Lexington

State
KY

Zip Code
40508

Purpose of Disbursement
Contribution

Candidate Name
Benjamin Chandler

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 06

Transaction ID: 4646966

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Sali For Congress

Mailing Address PO Box 71

City
Kuna

State
ID

Zip Code
83634

Purpose of Disbursement
Contribution

Candidate Name
William Sali

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: ID District: 01

Transaction ID: 4646967

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Friends Of Joe Baca

Mailing Address 555 Capitol Mall Suite 1425

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Contribution

Candidate Name
Joseph Baca

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 43

Transaction ID: 4646970

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Price For Congress

Mailing Address P.O. Box 425

City
RoswellState
GAZip Code
30077Purpose of Disbursement
ContributionCandidate Name
Thomas Price011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 06

Transaction ID: 4646971

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Amount of Each Disbursement this Period

2000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Lucas For Congress

Mailing Address Post Office Box 1726

City
Oklahoma CityState
OKZip Code
73101Purpose of Disbursement
ContributionCandidate Name
Frank Lucas011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OK District: 03

Transaction ID: 4646972

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Amount of Each Disbursement this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Stivers For Congress

Mailing Address 81 S Fifth Street

City
ColumbusState
OHZip Code
43215Purpose of Disbursement
ContributionCandidate Name
Mr. Steve Stivers011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 4646974

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Hoyer For Congress

Mailing Address 4201 Northview Drive
Ste. 307

City State Zip Code
Bowie MD 20716

Purpose of Disbursement
Contribution

Candidate Name
Steny H. Hoyer

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 05

Transaction ID: 4647202

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Friends Of Sam Johnson

Mailing Address P.O. Box 860096

City State Zip Code
Plano TX 75086

Purpose of Disbursement
Contribution

Candidate Name
Sam Johnson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 03

Transaction ID: 4647203

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Tiberi For Congress

Mailing Address 2021 E Dublin Granville Road
Suite 2000

City State Zip Code
Columbus OH 43229

Purpose of Disbursement
Contribution

Candidate Name
Patrick Tiberi

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: 4648214

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Charles Boustany Jr Md For Congress Inc

Mailing Address PO Box 80126

City
Lafayette

State
LA

Zip Code
70598

Purpose of Disbursement
Contribution

Candidate Name
Charles Boustany, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 07

Transaction ID: 4648241

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Republican Majority Fund

Mailing Address PO Box 144
Suite 300

City
Alexandria

State
VA

Zip Code
22313

Purpose of Disbursement
Contribution

Candidate Name
Republican Majority Fund

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 4648258

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

2500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Friends Of Jay Rockefeller

Mailing Address PO Box 1909

City
Charleston

State
WV

Zip Code
25327

Purpose of Disbursement
Contribution

Candidate Name
John D. Rockefeller, IV

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District:

Transaction ID: 4648707

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

4000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Walden For Congress Inc.

Mailing Address PO Box 1091

City
Hood RiverState
ORZip Code
97031Purpose of Disbursement
ContributionCandidate Name
Greg Walden011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 02

Transaction ID: 4648708

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Amount of Each Disbursement this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mike McMahon For Congress

Mailing Address 66 Arnold Street

City
Staten IslandState
NYZip Code
10314Purpose of Disbursement
ContributionCandidate Name
Mr. Michael McMahon011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 13

Transaction ID: 4648961

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Amount of Each Disbursement this Period

2500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

91500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Major Thibaut Campaign Fund

Mailing Address 2004 False River Drive

City State Zip Code
New Roads LA 70760Purpose of Disbursement
ContributionCandidate Name
Joseph Major ThibautOffice Sought: ☒ House
☐ Senate
☐ President

State: LA District: 18

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼011
Category/
Type

Transaction ID: 4591015

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	8

Amount of Each Disbursement this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Friends of Nick Micozzie

Mailing Address P.O. Box 234

City State Zip Code
Clifton Heights PA 19018Purpose of Disbursement
Nicholas Micozzie, STATE HOUSE 163rd PACandidate Name
Nicholas MicozzieOffice Sought: ☒ House
☐ Senate
☐ President

State: PA District: 63

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼011
Category/
Type

Transaction ID: 4646965

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Amount of Each Disbursement this Period

500.00

Nicholas Micozzie, STATE
HOUSE 163rd PA

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 311 / 311

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Morris C. Knutson

Mailing Address 1836 Charles Avenue

City
Turlock

State
CA

Zip Code
95380-4232

Purpose of Disbursement
Contribution Refund

Candidate Name

010

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 4642585

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2008

Amount of Each Disbursement this Period

750.00

Contribution Refund

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

750.00